APPENDIX III

AGE-FRIENDLY ACTIONS WITH DETAILS AND RATIONALE

Communication and Information

CI 1  Increase coordination among programs to ensure consistency of messaging and information sharing

CI 1a  Coordinate program plans and communication efforts to reduce duplication among stakeholders with an emphasis on providers of Age-Friendly programs. Increase message consistency and highlight how programs complement and/or build on each other. Emphasize information sharing among providers and create easier ways for providers to share information with their clients. This includes providing information in multiple languages and tools to allow providers to customize the communication.

Create community and business partnerships to disseminate updates, share information and coordinate programs around age-friendly topics. This is a collaboration network model. Collaboration occurs by age-friendly providers sharing information about their respective programs, service offerings, and communication priorities with each other. Network model occurs with information disseminated by age-friendly providers to their clients.

Program builds on the insights and success of Local Health Improvement Coalition, Journey to Better Health, the Howard County Government’s Faith-Based, and other initiatives which have both a collaboration and network approach. The benefits of a collaboration model are prioritizing key communications, creating shared or cross-linked communications and reducing duplication. A second benefit is to gain access to the clients and participants in Columbia’s Villages, cultural associations, and other diverse organizations where communication is shared with clients/participants and disseminated to the community at large.

CI 1b  Create and utilize coordinated communication channels (online communication boards and/or regular roundtable discussions) among communications professionals (e.g. county government agencies, community groups, non-profit and for-profit businesses) to share age-friendly
information and coordinate clear and consistent messaging to end-users in the community.

During COVID-19, public information officers throughout the county gathered on a regular basis to share information, get updates on vaccines and exchange information about other current issues. This resulted in more consistent information sharing to the public via social media channels, in publications and other communication vehicles. Similarly, a roundtable discussion was held to address obstacles and suggest solutions to vaccinating at-risk populations in Howard County, including older adults and those with disabilities. A group similar to this, convened on a regular basis, could be helpful to share consistent messaging about Age-Friendly programs and services with broad representation from Howard County Government, Howard County Health Department/LHIC, HCPSS, Howard County Library, non-profit organizations, the Horizon Foundation and the Columbia Association. Initially, it is suggested the group use the opportunity to educate/train each other about age-friendly best practices and then move to shared practices.

CI 2 Improve dissemination of information through direct outreach, both electronic and phone

CI 2a: Expand - via an opt-in process – and utilize the Age-Friendly Constant Contact list to disseminate information via email on a regular basis about age-friendly events, initiative updates, etc. and provide links and publicize through social media and partner agencies.

Having access to a list of older adults who opt-in to receive Age-Friendly emails on a regular basis provides an inexpensive and immediate means of sharing timely and important information. Constant Contact has proven to be a reliable and trusted method of sharing information during the pandemic while 50+ centers have been closed. The opt-in (subscription) link can be posted on the Age-Friendly and Howard County websites, promoted through Office on Aging and Independence and County publications (like the 50+ Connection, 50+ center newsletters, Resource Guide, the Ball Bulletin and others), posted on County social media channels and shared with other County departments and community partners.

CI 2b: Utilize phone communications (e.g. phone trees and mass calls or texting) to contact individuals who want to receive information about age-friendly events, initiative updates, but may lack Internet access.
Howard County Government has successfully used mass calling (which can be automated robocalls, or set-up for a special event through a registration process). During COVID-19, telephone town halls helped reach many residents and resulted in a significant increase in participation, especially among those who may not have access to the Internet or who do not follow social media. Additionally, many Villages, faith communities, and senior support facilities have developed telephone-based programs. Examples include group telephone events, group telephone discussion, and phone trees for communication. Both today and in the future, there will continue to be those that do not have computer access or skills. Similar to podcasts, there is innovation in using a sound only approach; currently phone-only access to Webex and Zoom has limitations due to both the technology and to the level of engagement. One common method for phone contact programs is to use www.freeconferencecall.com which allows you to set up an account and use for free.

**CI 2c:** Increase and encourage the use of existing free or low-cost digital media platforms such as Twitter, Instagram, Facebook, and podcasts to create easy access to timely and relevant information about programs and services. These platforms do not require an Internet subscription, only cellular service.

*Statistics* show that roughly 75% of American adults have Internet service; however racial minorities, older adults, rural residents, and those with lower levels of education and income are less likely to have broadband or Wi-Fi service at home. Instead, they rely on smartphones as their primary means of online access as computers and other devices can be cost-prohibitive. Applications like Twitter or podcasts designed specifically for smartphones or tablets provide free, timely and dynamic “push” information to the public. This allows for immediate and interactive communication between organizations and the people they serve, when compared to websites that require user effort to visit in order to stay updated.

**CI 3** Develop guidelines, media kits and communication campaigns to promote positive perceptions of older adults and to increase communication of available resources

**CI 3a:** Create and implement age-friendly and ADA-accessible print, email and website guidelines for county agencies, businesses, community organizations, faith organizations, the Age-Friendly Howard County website and related listservs.
Studies conducted by Pew Research and others on older adults and technology have found that many older adults continue to prefer printed information resources for ease of access (no technology required) and retention (easy to tear or cut articles out and file). But many publications and advertisers do not take account of the physiological issues that affect older adults’ vision, and as a result may produce materials that are difficult for their intended audience to read.

A simple and effective guide to age-friendly and ADA accessible print and graphic design recommendations (the size and type of font, minimal use of italics and light colors, adding alt text to photos and graphics, etc.) can increase the usefulness of materials created for older adults and persons with disabilities. One of the first steps taken by Age-Friendly DC in 2016 was to issue an Age-Friendly Guide to Communicating with Older Adults, which was shared with all city agencies as well as local businesses and universities. A Howard County version of the guidelines is currently under development.

Even older adults who are comfortable with technology and get their information online will benefit from high-contrast text and limiting the use of rapidly moving pop-ups and other methods commonly used to attract reader attention online. So, guidelines to communicating with older adults should also be shared with those designing websites, social media posts and other online communications.

**CI 3b: Develop Age-Friendly social and print media guidelines that define and address ageism in Howard County for government and quasi-government agencies, non-profits, businesses, and faith communities to reflect an unbiased view of aging. The guidelines will also provide alternatives to ageist language.**

Age-related bias, or ageism, can be intentional, situational or unintended, but each can result in a negative connotation of a person based on their age. Just as person-first language seeks to dispel the bias toward those with disabilities, avoiding ageist language in everyday discourse can help reframe the public’s perceptions of aging.

We ran into wording that implies that aging happens to someone else — a phenomenon that social scientists call “othering.” Our common labels — seniors, senior citizens — set older people off as a distinct social group. Some of our labels are often prefaced with “the” — like “the elderly” or “the aging population.” This subtly positions the group as
an object — and one with sharp boundaries. Along the same lines, we found that pronouns may be tiny, but they are mighty. In interviews, people in their 50’s and 60’s imagined how awful it must be for “them” — the people who were really old. Even well-intentioned advocates framed their cause as being about what “they” need.

CI 3c: Create and promote an anti-ageist communication campaign for the Howard County Public Information Office and share with county departments and community partners. This will help the county’s outreach to be mindful and purposeful, while creating discourse in the community about the effects of ageism and encourage residents to reframe their concepts of aging.

County Executive Ball has reiterated that racial and socioeconomic equity should be given significant considerations when planning and developing policies and practices that impact public services, programs and initiatives. This year, the Ball administration established a position for an Equity and Restorative Practices Manager within the Office of Human Rights and Equity to identify current disparities and implement practices and policies to eliminate them.

There are several examples which support the implementation of age-friendly communications and policies, and the development of communications campaigns/plans. One such methodology is the Framework Institute’s research, which takes a more policy-oriented approach to reducing ageism in society, rather than providing specific guidelines. More information can be found at https://www.frameworksinstitute.org/issues/aging/.

Communications campaigns like AARP’s #DisruptAging and the WHO’s #YearsAhead are also good examples of campaigns which put a positive face on aging. Howard County can utilize the tools of the national campaign to combat Ageism led by the Framework Institute and supported by AARP, American Society of Aging, Gerontology Association of America, and Grantmakers for Aging. Their recommendations address language, use of media, and formulating responses to common situations where bias creates a negative impact, key elements of any plan to be created for Howard County.

CI 3d: Develop and continuously update an Age-Friendly information/media kit to include free graphics, print ads, sample social media posts, PSAs and substantive, topical articles. Post the media kit on the Age-Friendly website and publicize its availability to County departments and public information officers (PIOs), media outlets, community partners and other communication
professionals to utilize in their print and online formats. Also pursue partnerships with existing media already reaching target audience including non-English speaking and diverse populations.

By making high quality Age-Friendly media kits readily available for use by community newspapers (print and online), websites, blogs, social media outlets and information kiosks at places of worship, medical buildings, and county departments, we can keep the Age-Friendly flow of information current and consistent. In addition, when appropriate, the County may want to purchase advertisements or advertorials in publications targeted to older adults for particularly important information (like the Howard County Beacon), as well as encourage expanded distribution of such media to audiences that aren’t being reached otherwise. Utilizing targeted media that are already reaching the intended audience is a highly cost-effective way to share the information the Age-Friendly initiative seeks to provide. And for the difficult-to-reach audiences that are home-bound, technology-challenged or in underserved communities, existing free print publications could be directly mailed to homes or delivered to churches, apartment buildings and stores where people live and shop. As an example, the Area Agencies on Aging of Baltimore County, Montgomery County, Washington, D.C., and Fairfax County either publish their own monthly print publication or partner with an existing publication such as the Beacon to share important information with their prime audience. Currently, the Howard County Office on Aging and Independence publishes a two-page "50+ Connection" newsletter in the Howard County Beacon. This could be expanded to include additional pages in a print format or formatted as a digital edition to include additional information online.

**CI 4 Expand and publicize the availability of free Internet access in identified areas of need.**

**CI 4a: Advocate to expand free access to the Internet in places such as subsidized and moderate-income housing, and other complexes serving older adults and persons with disabilities. This also includes publicizing that government buildings offer free Internet access.**

The Internet represents a fundamental shift in how Howard County residents connect with one another, gather information and conduct their daily lives. Studies conducted by Pew Research have shown that six in ten older adults use the Internet; at least 70% of people aged 65 and above spend some time online daily with the average being about 27 hours per week. Internet access is crucial to receive timely and accurate
information, connect with healthcare providers, and maintain social connections; it should be regarded as a necessary utility when establishing residences and planning for the future retirement needs of moderate to low income older adults and marginalized communities. In fact, this type of future planning is already being termed an “RDP” or Retirement Digital Plan.

During the Covid-19 pandemic, there has been an increase in the use of telehealth visits among older adults. Older adults say they would be more likely to use these services in the future citing the convenience and decreased concerns over privacy issues.

"The challenges of the COVID Pandemic have highlighted the gross inequities between people who are digitally connected and those who are not. The best example of the inequity is the roll out of the State of Maryland’s vaccination clinics. In the beginning, the only way to get information was to sign up online through local Health Deps, CVS, Walgreen, or Giant. The Howard County OAI received hundreds of calls from older adults who had no digital access or those who had access, but lacked the skills needed to complete the actual appointment sign up." - Jill Kamnetz, Department of Community Resources & Services, MAP Office

CI 5 Develop programs to provide technology devices (new or donated), access to information for those without Internet, and technology education and training

CI 5a: Enhance and publicize technology education and training programs that use virtual and in-person methods to improve technology skills among older adults, adults with disabilities, non-English speaking, and culturally diverse older adults. Employ intergenerational practices, partnerships, and internships with local schools, colleges, cultural, and religious organizations.

Research has shown that the use of new technologies by older adults significantly contributes to a better quality of life, improving parameters of daily living such as transportation facilitation, communication and participation in social activities. Yet, many older adults are still not using technology to its fullest potential. R. S. Jefferson says of older adults and technology devices, “…the problem isn’t owning them, it’s using them.” While people over age 65 are increasingly going online, yet nearly half of those that do say they lack the training or confidence to use their devices.

There are even fewer tech training opportunities for those with disabilities, non-English speaking, or culturally diverse populations. New devices coming on the market may
have an appreciable impact on this however, including ILA, a dual-sided device which allows any two people to easily and instantly have a real-time, natural back and forth conversation no matter what language or method they use to communicate. The Office on Aging and Independence has tested and purchased five ILA devices for use in their offices when face-to-face communication can again occur.

Mae Beale, a Howard County older adult, remarked that when she visited a COVID-19 vaccination site, she was impressed by how many older adults were on their smartphones; at the same time, she realized that many of them lacked the training/knowledge to use their devices effectively or at full potential. Vision and/or cognitive impairments may also impact the ease of use.

Examples of technologies the Work Group learned of include:

- The RAZ Memory Cell Phone (designed by a company in Cabin John, MD, available free of charge for those who qualify through the Maryland Accessible Telecommunications Program) is the only cell phone specifically designed for individuals with dementia or Alzheimer's, and also benefits those with low vision. The phone’s basic approach is straightforward: make it as simple as possible for the user, while providing the caregiver the ability to control the more “complicated” features of the phone remotely through an online portal. The phone only supports calling.

- The Village in Howard recently received a small grant from the Community Foundation in Howard County to explore the use of the Alexa Echo Show 8 device which is a version of Amazon’s Alexa that has an eight-inch video screen. A work group will identify who will try the devices to determine which features are most useful. The device offers video calling which may improve human contact and help address issues of loneliness and isolation during the pandemic. This technology also can provide some assistance to members with visual and hearing impairments.

- Education efforts currently exist for older adults but need to be more widely advertised. When 50+ centers closed due to the pandemic, the Howard County Office on Aging and Independence (OAI) created the Virtual 50+ program to maintain connections with members and provide programming consistent to what they would receive in-person. As part of this effort, OAI offered digital skills training for older adults to learn how to access online classes like Zoom or Webex using a variety of devices, as well as intergenerational programming, and programs for Korean-speaking older adults.
CI 5b: Form a committee to create a system capable of redistributing technology devices that are donated, reused, and/or refurbished throughout the county. These devices should be free or discounted to low-income older adults and persons with disabilities.

Making technology available to older adults and underserved communities through a redistribution program will help to ensure that these groups have access to current information about programs and services and a way to communicate with others in the community. These programs are already being created in Washington DC and nationwide to provide lower cost devices and training. In the US, 25% of people live with a disability, putting them at an even greater disadvantage regarding access to technology, because of their additional needs for assistive devices. Options to serve the vision- and hearing-impaired, and those with a diagnosis of dementia or other memory disorders are available but can be expensive. A redistribution program would help to bridge the digital divide in Howard County for individuals living with disabilities.

CI 5c: Improve outreach to all older adults regarding technology training opportunities throughout the County. Create and distribute printed technology resources lists for older adults via publications, refrigerator magnets and door hangers. Alert adults of resources to assist with day-to-day routines by using virtual assistant technology. For example, individuals may:

- Learn to use technology to set up appointments on calendar
- Set reminders for medications
- Secure household with technology
- Make a grocery list
- Use notes feature to make lists

When individuals can use technology, it gives them more opportunity to maintain their independence. Outreach to older adults who may not have the knowledge or skills to use handheld technology can provide information for routine needs which can be organized by using technology. It is important that marginalized groups be targeted in this outreach—individuals for whom English is a second languages (ESL), persons with low-income, persons of color, persons with disabilities. The organizations that currently train on technology usage may also have the ability and resources to train on additional technology which is accessed with virtual assistant technology, or smart phones.
By creating and distributing printed technology resources lists (examples of products include refrigerator magnets and door hangers), members of the community who are not aware of resources would have a quick overview of what resources are available and how to get connected with an agency that could help them with needs. Documents should include large print and succinct references, so they are easier to read and should be handy for the individual to find.

A Review of Age Friendly Virtual Assistive Technologies and their Effect on Daily Living for Carers and Dependent Adults

https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6473849/

https://www.aarp.org/home-family/personal-technology/info-2014/is-this-the-end-of-the-nursing-home.html

https://www.aarp.org/home-family/personal-technology/?intcmp=AE-HF-SUBNAV-TECH

Current technology teaching resources in Howard County (not an all-inclusive list)

Howard Community College currently has a Lifetime Learner program for 60+

https://www.howardcc.edu/programs-courses/continuing-education/courses/seniors/

Howard County Library has Community Education resources

https://hclibrary.org/community-education/

Columbia Association Resources for Mature Adults

https://www.columbiaassociation.org/community-program/mature-adults/helpful-resources-mature-adults/

Howard County 50+ Centers

https://www.howardcountymd.gov/50pluscenters

The on-line survey was set up to allow unlimited responses from any given computer, in order to facilitate submission via libraries, 50+ Centers, and instances where multiple members of a household wanted to all participate. Examining IP addresses that were captured, 9% of surveys (141 IP addresses) represented cases where multiple surveys were received from the same IP address. It is our hope that the majority of these
instances reflect cases where multiple, independent members of a household completed the survey independently; though we cannot rule out that specific individuals took the survey multiple times. It is unlikely that any such duplicate entries would have a significant bearing on the overall findings given the size of the overall respondent population.

**CI 5d: Enhance usage of technology**

- **Provide devices and Internet access to those without**
- **Provide instruction to increase usage**
- **Create a coalition of organizations that are already providing programs to share ideas and reduce duplication**

Studies have shown that social isolation can have a negative impact on healthy aging. *This was identified as true* prior to the current isolation issues caused by COVID-19 and is exacerbated by the need to socially distance. One way to mitigate isolation is by using technology. Older adults who are unable to use technology are at a disadvantage, as they cannot participate in many activities and may not even recognize their disadvantage. Maintaining social connections with friends, family, and organizations providing assistance is key, and using technology to perform routine activities like shopping, banking, telehealth, etc. will help promote quality of life.

The organization [Rewire.org posted data](https://www.rewire.org/) about social isolation in their January 2021 blog: In September 2018, one in three adults ages 45 and older were lonely, according to AARP. Loneliness and social isolation increase risk of infections, heart attacks, stroke and cognitive decline, adding $6.7 billion to US healthcare expenses every year. Young people are struggling with loneliness as well; *A report from Cigna in 2020* stated that 79 percent of people from Generation Z (ages 18-22) and 71 percent of millennials (ages 23-37) feel lonely.

In an [article by Vox.com dated 1/27/21](https://www.vox.com/), the following statistics are offered: “Nearly 30 percent of people in the United States over the age of 65 do not use the Internet, and more than 40 percent did not have broadband access at home.” This becomes an extremely important statistic in the deployment of the COVID-19 vaccine which is mostly happening via online access to appointments. Even when they do use the Internet, there are other barriers, such as visual impairments that may limit their ability to manage the screens. Having to access vital vaccinations via online programs makes the most at risk the least likely to succeed.
While technology is not the sole answer to this loneliness epidemic, it is one way to mitigate the lack of social contact caused by the pandemic, or simply by the inability to attend in-person events due to disabilities, transportation barriers or lack of funds. Unless there is an increase in the availability of devices and Internet, or to the ability to access online programs, progress may not be made as quickly as needed. Some issues that need to be addressed:

- Virtual programs through the Office on Aging and Independence currently are not getting a lot of participation despite robust offerings; feedback indicates that barriers exist for people without access to equipment, to the Internet, or both.
- Difference between accessibility and usability; 2010 census report indicates there is access in Howard County at 96% with computers and 93% with Internet. These numbers are not broken down by age so it is not possible to focus on this demographic using them, and it might be that they have changed due to the pandemic and economic fallout.
- Social isolation in aging populations was already a problem but is magnified by need to stay at home due to pandemic, making connection via technology even more vital. Clearly the digital divide exacerbates the problem.
- Connection via technology can include devices other than computers; there are experiments being done with voice-activated equipment which could also be considered in the county.
- This recommendation will connect well with other recommendations, such as the Age-Friendly Ambassador program, and the Centers Without Walls recommendation.
- Some programs that can potentially be tapped are in existence already; a few of them are listed below.

**CI 6** Publicize and support a newly created Age-Friendly Ambassador program

**CI 6a** Publicize and support the newly-created Ambassador outreach liaison program (as recommended/developed by other workgroups) and create a training component to educate ambassadors and residents about Age-Friendly programs and services in the County (digital or in-person). The Ambassador outreach creates a two-way dialogue between organizations/community groups and residents.
Several workgroups have suggested implementing an Ambassador outreach liaison program between Howard County Government departments and key organizations and community groups. This recommendation goes a step further and underscores the need to communicate the availability and benefits of this trusted partner model to the public and provide ongoing training for Ambassadors. The communications challenges during the pandemic have highlighted the importance of having trusted sources of information for the public, as well as effective timely communications among county government, critical institutions and community groups. It has also emphasized the importance of reaching out to residents who may not have access to the Internet or social media outlets. A successful Ambassador program focuses on identifying key trusted leaders who can build relationships with diverse communities, share important information, and act as a conduit for feedback from end-users. To be effective in this role, Ambassadors will require ongoing training, including culturally appropriate and language specific tools, and a commitment to identify and reach out to underserved or socially isolated populations.

CI 7  Enhance the County website to make it more user friendly, and increase the public’s access to available resources

CI 7a: Make Howard County website more user friendly.  
• Include icons to direct links for resources within the website 
• Include answers to technology specific questions on the County website. FAQs written and presented verbally (with videos, PowerPoints, etc.). 
• Ensure that the website is optimized for translatability into other languages.

The Age Friendly Howard County designation was launched by Howard County Government and the County website may become more of a resource hub and information repository for older adults and care givers.

The current structure of the County Website lacks some settings which would assist computer users of all levels locate information for resources.

Some improvements to make the website age friendly:
• Increase font size or provide ability for user to do so 
• Provide user ability to translate text into a wide variety of languages
• Use high contrast color distinction (black type on white, black type on yellow); avoid pale or muted color fonts
• Simplify formatting
• Add screen reader technology to the website

https://econsultancy.com/six-design-tips-for-making-your-website-senior-friendly/
https://www.nngroup.com/articles/usability-for-senior-citizens/

Maryland Government websites with a more user-friendly organization
  - Baltimore County www.baltimorecountymd.gov
  - Montgomery County www.montgomerycountymd.gov
  - Prince George’s County www.princegeorgescountymd.gov

It is important to have more videos (or links to You Tube) that explain simple but important matters that residents ask questions about frequently. Frequency Asked Questions (FAQs) on various department webpages and in an easy-to-find section of the website could help to decrease time residents spend searching for answers.
Health and Community Resources

HC 1  Expand access to information, a website where residents can directly search for all services and programs in the County, including more information on housing options

HC 1a: Upgrade Howard County Office on Aging and Independence’s (OAI) website and Resource Guide (online and hardcopy versions) for easier search capabilities for Howard County residents doing their own research. Include in the Resource Guide all non-profits in the county and their services. Add in the hard copy Resource Guide a matrix of organizations and services. Display in the online Guide’s search function the services matrix as the first result when searching for a term that is a service in the matrix.

The Resource Guide should be modified to include all non-profits in the county and their services to provide county residents with more options to allow individuals to connect with services that fit their individual needs. One size does not fit all and the inclusion of all non-profit organizations within the county would expand access to options based on location, availability, special needs and other criteria.

The hardcopy Resource Guide with an added matrix of organizations and services is suggested. A matrix would serve as a visual reference that would help individuals more easily identify resources that fit their needs. The matrix would list resources and their services in a consistent manner, making it easier for individuals to self-serve and connect with all available resources and organizations. The online Guide’s search function could display the services matrix as the first result when searching for a term that is a service in the matrix to ensure consistency in the information offered and to be inclusive in providing access to all organizations.

HC 1b: Create a lookup table of OAI standard terms and definitions with common synonyms or phrases the public often uses. Make this lookup available on the OAI website.

Individuals often are unfamiliar with standard or professional terms, acronyms and jargon unless they are already connected to the system or a navigator. This is especially true when a caregiver or an individual is receiving help from family and friends. Creating a lookup table of OAI/professional standard terms and definitions with common synonyms or phrases the public often uses would help individuals navigate the
resource guide to self-serve and connect with services. This lookup should be available on the OAI website.

**HC 1c: Maryland Access Point’s (MAP) searchable database must be modified/updated to include all the county non-profits and their services.**

MAP’s searchable database must be modified to include all the county non-profits and their services and search enhancements for the same reasons included in the rationale for HC001. It is important to ensure the MAP database include the same information as the Resource Guide to ensure information provided to county residents is consistent. The Resource Guide isn’t necessarily known to all residents and the MAP database is another door to connect to services and organizations that meet the needs of residents.

**HC 1d: Increase information and services available to residents and their families about nursing homes and assisted living facilities in Howard County, including whom to contact with complaints.**

The pandemic has spotlighted the problems that can occur at nursing homes and assisted living facilities as well as the relatively low level of state and local regulation and inspections of some of those facilities. While some of this may change as a result of the pandemic, there need to be clearer channels for obtaining objective information and lodging specific complaints about such long-term facilities located in the county. The County’s Long-Term Care Ombudsman program furnishes some of what is needed, and the Resource Guide offers basic contact information for the facilities, but there is a need for more information to help residents in need of such care — and their families — to assess which facilities, if any, are right for a particular county resident’s situation. Perhaps a group such as the Kaiser Family Foundation might be willing to fund a pilot program.

**HC 1e: Explore viability of collaboration with existing organizations in providing a one-stop, web-based listing of age-friendly activities (e.g. utilize Age Friendly, Visit Howard County, ACS, COGS website or another platform) or create a new one.**

Over the course of the time that the Social Participation work group has been convened, the various community representatives have often shared that there are numerous opportunities for social participation [and health and wellness activities] already established in Howard County. Government agencies, non-profit organizations, private businesses, faith organizations, and more offer a wide variety of events and
activities for people of all ages. The barrier to participation that was most commonly identified amongst the work group members was that the greater population was unaware of the variety of opportunities currently available.

Though the work group comprised a small representation of the population, this theme was also present in much of the research completed by the work group. When reviewing Age-Friendly action plans from around the country (10), focusing on jurisdictions that had population demographics similar to Howard County’s, the need to regularly disseminate information was a common theme. In addition, the creation of a centralized database was mentioned by name in a majority of the plans reviewed.

To examine if this recommendation was consistent with perceived needs and desired solutions in Howard County, the work group created and distributed a survey asking about different priorities that would contribute to the goal of improved social participation. The creation of a centralized database was among the options both citizens and organizations could choose from. There were 1,297 responses received to the survey with 1,224 responses from community members and 73 responses from representatives of community organizations (11). Overall, the directory choice was third most desired after Age-Friendly Ambassador and Expanding Volunteer Centers. However, the organizations that responded indicated that they had a very low capacity for maintaining such a directory.

**HC 2 Expand home and community-based services (e.g., chronic disease self-management, caregiver supports)**

**HC 2a: Improve diabetes management in older adults, especially via efforts targeted at minority groups.**

Diabetes is increasing in both prevalence and severity nationwide, and Howard County is no exception. The pandemic has spotlighted how diabetes is a major comorbidity that increases the susceptibility to and worsens the severity of COVID-19, but its role is similar with many other conditions. Moreover, its incidence is particularly high in disadvantaged populations that may have the least resources to overcome it. While the Office on Aging and Independence (OAI) has a good “Living Well” program for county residents with diabetes, and Howard County General Hospital (HCGH) has resources as well, there need to be more proactive efforts to both prevent and manage this condition. The ideal situation would be a demonstration or test program in a disadvantaged part of the county to head off and treat diabetes before it becomes life-
threatening, and the county may be able to interest an outside group in running such a pilot at the group’s expense. Organizations worth approaching on this could include the American Diabetes Association and the National Pharmaceutical Council (NPC), which is the educational arm of the pharmaceutical industry trade associations. One of the Work Group members has a contact at the NPC that he could ask about whom to approach regarding this.

**HC 2b: Develop a “hotline,” including some evening and weekend hours, and website to provide Howard County-specific answers and support for family caregivers.**

As one workgroup member has rapidly found out in the six months since his 100-year-old mother-in-law moved in with him and his wife, caregiving is a very full-time job, and major problems not directly related to medical care often emerge outside of working hours. There needs to be a local resource available in such cases to help caregivers determine where they can get specific kinds of help for situations such as when the caregiver(s) find out on short notice they need to be away or the person they are caring for suddenly stops understanding what he or she is being asked. Since County resources now may not have the extra capacity to furnish this, and since there are potential liability concerns to be weighed, perhaps an outside entity such as the Horizon Foundation might be willing to operate such a “hotline” on a trial basis.

**HC 3 Analyze the range of services available in the County, including gap analysis (need vs. availability)**

**HC 3a: Analyze the resources catalogued for consumers, the full range of prevention, treatment and palliative services currently available for target audience impact and their current capacity and limits, including geographic reach, language, disability. Expand upon, or scale up, existing services as appropriate to meet the needs in identified gaps.**

Using the catalogue of resources available to consumers, the network of leaders pulled together to collaborate should become familiar with the specifics of all resources, so they can be shared more widely. This is vital to making full use of current resources, as well as acknowledging and respecting the work already being done in the community. It is key to building trust between collaborating organizations. In Howard County, there are a plethora of health and service resources, but they are reaching a narrow swathe of the population that needs access.
Development of new resources is not the first step to remedying this gap. Reaching marginalized communities, such as non-English speakers, those with limited language skills, those with disabilities that limit their use of computer or written resources, or those who live in rural areas who do not know where to look or how to access these resources, may require the engagement of indigenous messengers and messages. Only when we’ve reached into these communities effectively will we know if new resources are needed, what level of demand there is and what modalities are most effective. Agencies that have resources or services then need to assess how their offerings need to be augmented or scaled up to meet the research-based demand.

References

Strategies to improve engagement of 'hard to reach' older people in research on health promotion: a systematic review  

**HC 3b:** Foster aging in place by having available home health services better known, objectively evaluated, and more affordable.

When Howard County residents seek to determine whether they indeed will be able to “age in place” rather than have to move, they need to know where they can find objective information about what they will need, from whom they can get it, and how much it will cost. Some of this information can come from friends and relatives, and much of it may already be available, but many people don’t know where to find it. County residents who develop problems getting up and down the stairs in their current homes, for instance, may not know that chairlifts can be rented as well as bought and how much the costs for this might be, plus which local companies are reputable vendors for that. County agencies can and do furnish some of this information, but they need to make that better known. Objective not-for-profit organizations such as The Village in Howard may be able to furnish informed opinions about which specific options may be best in which specific situations if residents with questions can be referred to them.

**HC 4** Develop a program of trained individuals to provide health advocacy (e.g., Senior Health Coaches) and informal outreach

**HC 4a:** Mobilize voluntary, informal outreach to isolated, culturally diverse and differently-abled individuals by providing stipend positions for volunteers from hard-to reach communities (Program example is Grannies on Benches). Provide training and credentialing for peer outreach workers.
Other groups may have called these community volunteers “Community Health Ambassadors”. This phrase has a different meaning in the literature, more similar to Health Coach. Initially, the goal of this recommendation was to use volunteers as messengers, who are trusted and credible, to develop ongoing relationships in segments of the population that have not traditionally used the available services or resources of community health information. Ideally, they should come from the segment of the community to which they are ambassador, to maximize ongoing contact, the ability to follow through on referrals and provide assistance in accessing resources as necessary. The work group recently learned of the hospital’s (HCGH) and Health Department’s intent to recruit for Community Health Workers (We Care community ambassadors). They have proposed a virtual training program that would provide a credential. If special attention were given to recruiting from marginalized communities, these workers could provide at least a pilot of which could demonstrate the impact of this approach, provide career potential for entry level staff, could expand to utilize volunteers who might be interested in networking within their natural communities, and later stabilize their availability to the communities they serve.

References


**HC 4b: Identify community-specific individuals who can serve as Senior Health Coaches to provide advocacy and follow-up with older adults through health care needs.**

The role of the Senior Health Coach, or advocate, is to provide continuing follow-up for individual older adults recently released from the hospital and/or managing chronic health conditions. These may be visits or calls to maintain medication adherence, encourage exercise or diet changes needed to maintain health during adjustment to a chronic illness, like heart disease, diabetes etc., or just an ear to listen to someone coping with depression. Research demonstrates that those with personal experience with the condition can establish a strong relationship that is very effective in maintaining healthy behaviors. These peer coaches can also identify warning signs that may need to be referred to health professionals or advocate for additional ancillary services if needed. They have more time to follow-through and ensure that timely and appropriate care is available. This can be key to serving individuals who place limited trust in health professionals or who have language or cultural differences that require translation or mediation.
Community-based interventions to enhance healthy aging in disadvantaged areas: perceptions of older adults and health care professionals

Community Health Ambassadors: A Model for Engaging Community Leaders to Promote Better Health in North Carolina
https://www.nyaprs.org/peer-health-care-coaching

HC 4c: Navigation: Identify and promote community navigators to assess staff resources to meet demand for enrollment assistance in health and community services and organize or enhance resources to meet demand.

Community members, especially individuals who do not self-serve through technology, often do not know where to turn in times of need to navigate existing health services. While Maryland Access Point (MAP) serves as an entry point for the Office on Aging and Independence, other navigators within community organizations also exist. As mentioned in other workgroups, Age Friendly Ambassadors could guide people, encouraging and helping them seek information as trained, trusted sources for information and referral. Ambassadors would be trained to help fill this need for individuals throughout the age spectrum.

Establishing Age-Friendly Ambassadors throughout the community and particularly in targeted areas could prove especially beneficial for diverse populations who may be less likely to initially use the Office of Aging and Independence or other government agencies as a source of information and assistance. For example, the Asian community, according to the 2020 Age Friendly Survey, “(which was disproportionately older in this sample), stated a lower likelihood of using the Office on Aging and Independence publications and libraries as a source of information relative to other groups (which could be a product of limited English proficiency and inability to access information in their primary language through these sources).” Such considerations are critical in providing information and access to services to all members of the community. By developing a rapport in the community, Age-Friendly Ambassadors can act as connectors to the county’s agencies and other health and community service providers.
HC 5 Investigate and promote innovative models of affordable respite care

HC 5a: Develop innovative models of affordable respite care inside and outside the home, in addition to affordable, multi-level programs to meet the individual needs for in-home personal care.

Introducing and developing models that currently do not exist within the County would promote health for community members aging in place by making respite care and in-home personal care more affordable. According to the 2020 Age Friendly Survey, a need for such was identified by survey participants, “among individuals that self-identify as a primary caregiver, the resources they feel are most important are information related to in-home care and medical conditions/treatments, and practical trainings on how to assist a family member with a disability/illness. Notable is that weekend respite care was identified as more important than respite care during the workweek.”

According to the National Academy of Medicine, caring for people with serious illness requires building new community-based care models that:

- integrate the currently fragmented array of social supports and primary, specialty, and hospice services available in most communities
- broaden the scope of palliative care beyond hospitals and into patient homes, nursing facilities, and office practices
- make use of telehealth
- expand the capacity and coordination of supportive social services along with medical care; and
- provide supports for family caregivers.

Examples of such models was published in an NIH article, The Health Care Home Model: Primary Health Care Meeting Public Health Goals (https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3483945/):

“Many statewide pilot and demonstration projects are under way to test the clinical efficacy of the patient-centered medical home model and to develop an appropriate reimbursement structure for primary care practices that are recognized or accredited as patient-centered medical homes. One focus is fiscal viability and sustainability through innovative reimbursement mechanisms; the goals of a program in Colorado, for example, are to transform primary care and create a more cost-efficient health system. A pilot program in Maine is the first step in a projected statewide implementation of the
health care home primary care model. Public and commercial insurers are working
toward a payment system that rewards quality, as measured by Institute of Medicine
criteria (safe, effective, timely, efficient, equitable, patient centered), with the goal of
improving quality while reducing cost. Several projects are focusing on care
coordination for patients with chronic conditions, such as a North Dakota pilot project
that is following up on preliminary findings that the model saved $520 per member per
year, attributable to reduced hospital and ED use. A strategic plan has been developed
in Pennsylvania to improve chronic disease management and reduce avoidable hospital
and ED use and associated costs by improving patient self-management of chronic
disease and by use of evidence-based protocols, clinical information systems, and
community engagement.

The article also indicated that such models would reduce health disparities in minority
and low-income households, which have higher incidents of chronic illness. By
alleviating barriers, the health care home model is "a cost-effective way to improve
health care quality, reduce medical errors, improve outcomes for patients with chronic
disease, enhance management of psychosocial problems, and integrate mental health
services with primary care, all contributing to the reduction of health disparities."

Additionally, the article points out how the home health care model meets the following
specials needs in communities:

Chronic disease management: It is estimated that more than half (52%) of working-
aged adults have a chronic condition. They account for 4 times the health care
expenditures of adults with no chronic care needs. Incidence of chronic disease is
expected to increase as the population ages. The health care home model incorporates
an expanded role for the primary care provider in the treatment of patients with chronic
conditions, potentially reducing the need to see medical specialists. Elements of the
chronic care model are integral to the health care home, including support of patient
self-management, which improves outcomes for patients with chronic conditions such
as diabetes and cardiovascular disease.

Mental health integration: The responsibility to treat psychiatric disorders has
increasingly shifted to primary care providers, in part because of mental health provider
shortages and paltry insurance reimbursement for mental health services, especially for
children and youths. Adults with depression often do not receive treatment, and most of
those treated do not receive care consistent with best-practice guidelines. African
Americans and Latinos are especially likely to go without needed mental health services.
Patients with anxiety disorders use more primary care and medical specialty services than do other patients, incurring greater health care costs. For adults with chronic conditions, depression is associated with greater symptom severity, worse quality of life, and fewer screenings that might prevent serious complications, such as from diabetes. Major depression is associated with increased mortality. Integration of mental health and primary care services, an important element of the health care home model, is associated with improved access to mental health services and better clinical outcomes. This may be especially valuable for low-income and minority people with substance abuse disorders.

Women’s health: Comprehensive and coordinated care are key elements of the health care home model and integral to centers of excellence that have been developed to improve women’s health care services. Women often prioritize the health care needs of family members over their own. The health care home provides opportunities for women to receive health care services through co-located and coordinated systems of care when bringing a child or partner to a medical appointment. This may narrow the gender gap for receipt of preventive services. Co-located services and a family-centered approach to service delivery in the health care home also will contribute to reductions in health disparities and improvements in chronic disease management by allowing providers to address diet, nutrition, physical activity, and home environment factors that may contribute to multiple generations suffering from the same conditions, such as obesity, diabetes, asthma, and cardiovascular disease. Intergenerational care—involving multiple generations of her family for whose health a female patient may take responsibility—is associated with improved management of chronic conditions and better health outcomes.

**HC 6 Develop mechanism to ensure accountability and promote collaboration between service providers**

**HC 6a: Create a coordinating council made up of county agencies, nonprofit and voluntary organizations, acute and long-term care facilities overseen by an authority to maintain accountability and engagement of participants, establishing coordination processes, formalized workplans, MOU’s and evaluation**

Since health and community services are the concern of government, nonprofit, faith organizations and the philanthropic sector, they all need to be included in implementing solutions for the challenges faced in creating an age-friendly community. Research on
developing and maintaining community partnerships has demonstrated over decades that all involved partners responsible for actions related to community goals must be involved in all stages of the strategy’s implementation. Note this is not a new agency or nonprofit. It is a collaborative effort between the representatives of stakeholder groups: a community-wide committee that meets regularly to prioritize goals, identify resources currently available, and divide up tasks that match each organization’s own work and evaluate progress. This is a research-based strategy for addressing community issues. For this initiative to succeed, a group or individual within Howard County Government needs to be designated to oversee the Coordinating Council to ensure accountability for coordinating council members’ engagement and performance in meeting established goals.

References

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HC 7 Identify funding to increase communication modalities using input from credible messengers.

Other entities such as substance abuse prevention agencies, national and state mental health associations, international maternal health initiatives and college campuses have demonstrated the effectiveness and cost efficiency of embedded peers providing small group and individual health information and services. It is expected that as more individuals choose to age in community, the need for these Community Health Workers will increase and support should become available to expand such programs through county, state and private philanthropic organizations.
Outdoor Spaces and Buildings

OSB 1  Improve existing practices in outdoor spaces and buildings, including universal design, outdoor exercise equipment, enhanced security, and improved walkability

OSB 1a: Ensure universal design concepts are used for existing and future buildings and parks

Aging adults require a high standard for accessible design of public spaces. The use of universal design of sidewalks, buildings, roads, recreational facilities (inclusive of, but not limited to, 50+ Centers, Community Centers, etc.) restrooms and parks create an enjoyable and safe environment for users of all ages, sizes, and abilities. Universal design standards exceed the standards mandated by the Americans with Disabilities Act and provide for more universal ease of use by all. https://www.ncparks.gov/more-about-us/grants/cncb/resources-universal-design

OSB 1b: Develop criteria necessary to obtain an Age-Friendly Certification for outdoor spaces (parks, trails, etc.) and buildings.

The work group wants to encourage the use of outdoor spaces and buildings. An Age-Friendly Certification would be a significant draw for all ages to know that a facility will meet their needs. A certification obligates one to strive for excellence in meeting certain agreed-upon high standards. The certification can enhance or increase the value/efficacy within the community and create a more sustainable existence for all users of outdoor spaces (parks, trails, etc.) and buildings. Use of outdoor spaces has many benefits for all ages: raise the physical activity levels, reduce obesity; improve blood pressure, bone density and cardiorespiratory fitness. There are also mental health benefits: reduce stress, anger and aggression; improve coping abilities; lessen social isolation; enhance relationship skills; and improve cognitive functions. The certification of the outdoor space and/or building will greatly influence the likelihood of its use. Using a workgroup of invested entities to develop the criteria will ensure the certification will be valued and sought after. Miami-Dade County developed an Age-friendly Toolkit that could be used as a model. Their Toolkit includes standards for level of friendliness and resources to evaluate and to promote the certifications. A workgroup of business, county and citizen entities will develop the criteria and assist in promoting the certified sites. The County will review applications to determine the worthy sites.
OSB 1c: Initiate, develop, install and evaluate a pilot project of outdoor exercise equipment designed to help older adults stay mobile, healthy and physically active in their community.

A wide range of programs, events and activities are critical to creating parks that are dynamic, inclusive, accessible and welcoming to people of all ages, ability levels and interests. Fitness lots can and should enable physical activities by people of all ages. Park planners need to think strategically about where to place exercise equipment and fitness lots so the spaces will attract users of all ages. A Finnish playground manufacturer piloted "3 generational play" to a group of young children and older adults between 65 and 81. The older adults reported enhancements in balance, speed and coordination after a few months of using the park equipment and stated that they felt better mentally because of the exercise” (Elderly Playgrounds, 2006)(PDF). A pilot project of older adult exercise equipment installed in an Age-Friendly certified park will promote its use. The elements of an Age-Friendly certified park could include clean and pleasant environment, adequate pedestrian path and perceived safety. With every increasing decade of age, people become less and less active; but evidence shows that with every increasing decade, exercise becomes more important in terms of quality of life, independence and having a full life” (Larkin, 2007). Furthermore, with consistent physical activity older adults are reported to experience overall well-being in psychosocial, emotional, mental health, and cognitive functioning (Langhammer et al., 2018). Being exposed to a variety of exercise and exercise equipment can develop muscle mass and reduce falls which are both important for continued independence and mobility.

OSB 1d: Develop increased outreach strategies with local law enforcement to maintain and enhance the safety and security measures at local parks, recreational facilities, and other open spaces and buildings located throughout Howard County (to include, but not limited to, increased police presence, structural improvements, etc.).

While the amenities of an outdoor space and building are highly valued for the spaces to be used, individuals of all ages also want to feel safe in these settings (for example, lighting is important). This is a critical aspect of planning to increase the use of outdoor spaces and buildings. Enhanced collaboration with the Police Department is necessary to address concerns of security and improve feelings of well-being. It is recommended
the Office on Aging and Independence, invested entities, and the Senior Liaison of the Howard County Police Department will form a community work group to review strategies to increase the safety of outdoor spaces and buildings in Howard County.

OSB 2  Increase knowledge and awareness of public about outdoor spaces in the County

OSB 2a: Enhance the existing Age-Friendly Howard County webpage to include assessments and certifications of usable parks, trails, buildings and links to agencies, organizations and entities who oversee parks, trails and buildings.

‘Neighborhood parks and walking trails – present an opportunity for seniors to engage in physical activity that ultimately promotes physical and mental health.’ (p32 of ATL Age Friendly Action Plan 2014-2016). As part of an overall vision to educate and inspire the community, it is necessary to provide an enhancement to the existing Age-Friendly Howard County website. This enhancement will provide customers with information on parks, trails, buildings etc. that are considered ‘age-friendly’ and the specific amenities that each one has. This significantly streamlines the search process for customers and provides them with essential tools with which they can make their leisure decisions. This enhancement relates to the vision to promote inclusive, accessible, multi-cultural, multi-generational and sustainable spaces and provides a certification process that includes assessment of useable features in county outdoor spaces and buildings. By providing direct links to agencies and organizations, this allows customers to acquire additional information and who to contact for any questions.

OSB 2b: Develop and publicize an awareness campaign to promote the County’s Age-Friendly outdoor spaces and buildings.

In addition to creating an enhanced website for customers to gather information, the work group feels it is necessary to go one step further and launch an awareness campaign to inform the public about the age-friendly aspects of Howard County’s outdoor spaces and buildings. Considering the county’s diverse community, the awareness campaign will ensure that information is available in various formats and that all areas of the county are reached.

OSB 2c: Establish an Age-Friendly Ambassador program to focus on Outdoor Spaces and Building projects, audits, and community outreach.
As part of outreach, the work group feels it is necessary to create an Ambassador program. The purpose of this group would be to increase resident’s knowledge of and about buildings and outdoor spaces, gather information, assist in implementation of age-friendly practices, including but not limited to audits and certification processes, and build camaraderie amongst community members. They would be the ‘eyes and ears’ in the community and assist County and Community Agencies and Organizations to educate and implement age-friendly initiatives. In addition to the valuable asset that this group would be in providing information to the Age Friendly cause, it would allow community members to increase their social interaction and take pride in the county in which they live. An example of this is the Walk Audit: [AARP Walk Audit Tool Kit](https://www.aarp.org/health/physical-activity/info-2018/walk-audit-tool-kit.html).

A walk audit allows a community group to explore a pedestrian friendly environment, increase exercise opportunities and reduce traffic and pollution. These ambassadors would be key in the creation, promotion and enhancement of welcoming spaces, as per the work group’s vision. Community organization would be important in making this initiative a success.

**OSB 3**  
Promote donation programs for less well-known parks

**OSB 3a: Promote donation programs (e.g. ‘donate a bench’, ‘water fountain’) for less well-known parks.**

Many community members enquire on how to be involved in programs that benefit the area in which they live. For underutilized or lesser-known parks and/or public spaces, encouraging creative and innovative donation programs can help outdoor spaces and buildings thrive. These programs can be run through different organizations (e.g. Recreation and Parks, Columbia Association) and promoted through the Age-Friendly website and Age-Friendly Ambassadors. Examples could be installing a water fountain in a park where there currently isn’t one due to lack of funds, or adding memorial trees, benches etc. that serve to beautify the park, provide shade, a place to rest etc. and make the outdoor space more age-friendly. “Even the most active park user needs a place to occasionally sit. Well-placed and welcoming park seating is especially vital for older adults. Quality seating encourages people to use parks more often and for longer periods of time.”\(^1\) (AARP, 2018)
Respect and Social Inclusion

RSI 1 Expand, and promote, intergenerational activities

The purpose of this initiative is to enhance activities or programs that increase cooperation, interaction or exchange between any two generations. It is hoped that this initiative will create a legacy project that increases awareness, builds community, impacts social good, and provides opportunities for creative expression and multi-generational collaboration with ongoing opportunities and room to expand over time.

1. Older people (65+) are the fastest growing portion of the U.S. population and are expected to almost double by 2030 in Howard County (when the youngest boomers turn 66). At that time about 1 out of every 5 Howard County residents will be 65 and older (20% of the population). i

2. The special group status of older adults for housing, health care, educational and economic support, and transportation has served to further isolate older adults from other age groups. Conversely, children and youth, who need adult guidance and relationships, typically find little opportunity for meaningful exchanges with older adults. The shift from extended to more nuclear family structure has further contributed to isolation among older adults.

Moreover, this prevailing pattern of age segregation has been linked to the decline in life satisfaction among older persons and the increase in negative stereotypes toward older adults among younger people. Yet, efforts to programatically bring children and youth together with older adults have led to positive outcomes for both older adults and the young. ii

3. Depending on program design, intergenerational initiatives can function to promote educational objectives, arts and recreation interests, desired states of health and welfare, and socio-emotional well-being. (Universities, Arts Council), The value and importance of bringing generations together through intergenerational programs is becoming well known and there are many benefits these programs are bringing to participants of all ages. There is compelling evidence of a reciprocal relationship between volunteering and well-being for young and old alike and intergenerational programs have been found to diminish ageist stereotypes, strengthen communities, and lead to improved services and outcomes for children, youth and older adults. iii
Among others, some of the key benefits include:

a) Energizing older adults and giving them a sense of purpose, especially when they’re sharing their experience and skills. According to Generations Unlimitediv, older adults who regularly volunteer with children burn more calories per week, experience fewer falls, and do better on memory tests than their peers. There is compelling evidence that finding purpose and engagement also contributes to reduction in instances of Alzheimer’s in older adultsv;

b) Reducing a sense of isolation for older adults potentially relieves or lessens depression;

c) All generations learn new skills. Older adults can learn new technologies from the younger generation and youth can benefit from mature mentoring from their wise friends;

d) Helping younger generations understand aging and face their own more positively; and

e) Dispelling negative stereotypes and encouraging bonding among generations. For children and youth who don’t have grandparents or other elders in their families, engaging with older adults fills a social gap. According to Forbes, intergenerational programs may be “our kids’ best chance to learn from a caring older adult who not only has 'been there and done that,' but has a biological and instinctive need to give the next generation the best opportunity to succeed.”vi

4. Howard County has a diverse and growing population. The diverse economy of the county attracts jobs and industries of all types, from basic services and retail, to manufacturing and warehousing, to the high-tech jobs of the future. This results in a highly educated and talented pool of residents of all ages. Also, the diversity of housing draws a diverse population made up of many races who speak a variety of languages. And finally, given the high quality of its school system and broad scope of services, Howard County attracts many families with children. As a result, it has a higher proportion of families with children compared to Maryland and in general, the U.S.vii

5. Howard County conducted an Age-Friendly survey in the first quarter of 2020 to gauge impact of aging that could relate to the Age-Friendly initiative. While the findings are too numerous to cite in full, one important area was the extent to which
residents feel lonely and what ages and demographics loneliness seem to increase. Eleven percent of respondents overall reported feeling lonely “often” or “almost constantly” (this is lower than national estimates, which are around 17%). Females, those with lower education attainment, lower income levels, in poor health, speakers of languages other than English, especially among Asian and Hispanic communities, and among those in the older age brackets are more likely to feel lonely. Expanding volunteering opportunities for the older adult as well as for the younger population through increasing intergenerational programs will help reduce loneliness among Howard County residents. Although the survey was conducted prior to COVID-19, it significantly revealed that a significant fraction of people, 28% report that they would like to volunteer more and the desire to increase (or decrease) volunteerism in the coming year was strongly linked to age. For example, 36% of those under age 50 and 27% of those 70-79 expressed a desire to increase volunteer activities. Moreover, only 7% of those age 65+ stated they intended to decrease the amount of their volunteer activities in the coming year.

6. Non-profit and public organizations that rely on volunteers need an adequate supply of volunteers who are effective in the performance of assigned roles. Yet, little is known about what influences older adults to start, continue, or quit volunteering, or what motivates older volunteers. Moreover, the transition to encore adulthood often includes a renegotiation of life, both personally and professionally – and on new terms. To make this transition, encore adults need time, space, and resources to consider next steps. In addition, it is often seen that older adults have not appropriately planned for later life, therefore are not aware of the resources that are available to them. By incorporating Age-Friendly programs in the community and schools, students can learn early about what to expect in later life, how they can assist older people in their lives by knowing the resources that are out there, and also how to leverage and promote careers in the aging field.

7. There are numerous “models” of good practice – both nationally and locally – that can inform this effort as they have been tried and tested to demonstrate their effectiveness, paving the way for others to follow. It would be beneficial to learn from these experiences (such as AARP’s Experience Corp, Raising A Reader, AmeriCorps Seniors Matching Program, Eldera Mentoring program, Oasis, etc.) and adopt their evidence-based approaches that have demonstrated impact and pathways to change. Grants and other support mechanisms are also available from many of the national programs that could allow Howard County to not only utilize
lessons learned, but also to significantly scale up operations in a robust and effective way through partnerships with such efforts.

**Examples of specific sub-activities:**

1. **Older adults could improve the educational and socio-emotional outcomes for children and youth through the following type of initiatives.**

   a) Working with selected non-profits and community-based organizations to locate children/youth and matching them to vetted and suitable volunteers who can make a time commitment to work with each individual child and adult for designated age-groups, grade levels and subjects, including kindergarten/pre-school, elementary, middle and high school.

   b) Matching older adult volunteers with children and youth who are struggling or falling behind, especially in reading, math, science, and arts, especially due to the impact of COVID-19 which has led to isolation and marginalization of at-risk populations.

   c) Training a consistent group of volunteers to establish and grow relationships with students and teachers, providing nurture, a sense of security to children, and continuity of support on same days and times to create a reliable and productive schedule for struggling students and teachers (building upon some on-going programs such as A-OK, Bright Minds, CAC, etc.).

   d) Building self-confidence and stability for vulnerable and at-risk children and youth by providing them stability to succeed in education and life through weekly interactions with older adult volunteers that are adaptable to students’ needs and can provide them with a reliable, safe and nurturing interaction. (Faith Community)

   e) Preparing a “Grandma and Grandpa on the Go” cadre of volunteers to act as mentors for at-risk children in Title 1 Schools and throughout K-12. (Faith Community)

   f) Enhancing children’s learning by providing practical “real-life” examples of how classroom learning can be applied in different professions/occupations, through exposure to role models, mentors, and key informants.

   g) Developing observational measures to ascertain whether specific learning or behavioral challenges are being met such as, if students are learning, and if volunteers can calm and comfort at-risk children.
h) Supporting Howard County Public School’s Black Student Achievement Program (BSAP) which works in closing the achievement gap evident in the patterns of data between black students and the student population at large, in part through inter-generational tutoring and mentoring of students.

i) Across America, states and cities are grappling with how to address the catastrophic toll of COVID-19 on student learning and well-being. However, one lesson the pandemic has revealed is the vast energy of a wide range of actors outside the school walls—from families to food banks to employers—who can be powerful education allies for supporting the holistic development of young people. By harnessing this energy, it is possible to lay the foundation for a new way of schooling—one that is flexible, customized to local needs, and equitable and that brings together educators, students, communities, and families (including older adults) to support every student every day. The Brookings Task Force on Next Generation Community Schools envisions a scaled-up community school approach, where schools are the hub of children’s education and development—powered by shared leadership between schools and families, enriched learning experiences, integrated student supports, and strong community partnerships—to interrupt the growing education inequality.

2. **Students can be educated about the Age-Friendly Initiative through**

   a) An assembly/special program on Age-Friendly awareness during school hours presented to the whole school;

   b) An after-school Age-friendly club or extra-curricular activity facilitated by a teacher and an older adult volunteer to encourage and inspire students to engage more with older adults through intergenerational opportunities created by the club;

   c) having schools across the County participate in an Age-Friendly Fair (similar to a science fair) which they would pick an Age-Friendly domain of interest and complete a project to present during a school fair (some ideas may turn into an action item for the community – grant funded opportunity);

   d) Inventing a universal, influential, Age-Friendly character for young students which would be a character that would become well-known as the Age-Friendly Howard County Mascot; (Contest to raise awareness?)
e) A wellness day to promote the adoption of healthy eating and living habits that can help improve well-being for old and young alike, and reduce negative perceptions and/or impacts of aging; (Nutrition focused, Kaiser Permanente, Great Sage, MOM’s, David’s Natural Market)

f) Reciprocal project-based activities, such as *“Gathering Gardens”* on school grounds, indoors or outdoors, and *“Wellness, Nutrition, Telehealth”* sessions through multi-generational activities that promote socialization, growth, and collaboration, to increase understanding, and gain enrichment, opportunities to engage, communicate, and spend time in a safe, healthier environment. (Aetna, MAEOE, Master Gardeners, Community Ecology Institute).

g) Students participating in a locally-designed Service-Learning program or event to earn service hours that would go toward their required 75 hours needed to graduate, and in which students would complete a project to offer some type of Age-Friendly benefit to the community, advocate for older adults, or find ways to enhance the quality of life for older adults.

3. **Teachers and school councilors could become advocates of an Age-Friendly community**

   a) Incorporate age-friendly awareness into lesson plans;

   b) Participate in a county-wide challenge to write a short children’s story that would be read or available at all Howard County Public and Private Schools and at Libraries about the Age-Friendly Community in Howard County; and

   c) Create story board visuals, promotional flyers

   d) Invite Age-Friendly Ambassadors from the older adult community to help increase educational and cultural outreach to schools, increase opportunities for “special” teaching/learning sessions, and increasing understanding of “role models” from the professional community.

4. **Students can support the well-being of older adults by helping them**

   a) Navigate telehealth sites and teach/transfer knowledge and skills to encourage healthy behaviors;
b) Create awareness surrounding one’s personal responsibility to ensure good health at a young age, the idea of “health = wealth”; this could be carried out as a community fair or a school day activity;

c) Access food, housing, transportation, or other basic care needs requiring skills that the young can provide when such deficits may exist among the older population affected their well-being.

References

i Howard County Demographic Overview | Howard County Department of Planning and Zoning, Research Division

https://www.howardcountymd.gov/LinkClick.aspx?fileticket=fDFGOLGHz9Q%3d&portalid=0 (p.8).

ii Matthew Kaplan, PhD., Professor, Intergenerational Programs and Aging, Penn State University. https://aese.psu.edu/outreach/intergenerational/curricula-and-activities/handouts/factsheets/some-whats-and-whys-of-intergenerational-programming

iii https://blog.thegoodmangroup.com/benefits-of-intergenerational-programs

iv https://www.gu.org


vii About 36% of Howard County households include children under 18 years old. For Maryland and the US both, only 27% of households include children under 18. (Ref. Howard County Demographic Overview | Howard County Department of Planning and Zoning, Research Division, ibid. p.10).

RSI 1a: Expand partnerships (including public-private partnerships) to increase targeted and inclusive inter-generational activities, and to help mobilize additional resources for strengthening intergenerational programs. Implement a mobilization and marketing strategy to attract and prepare volunteers and stakeholders to engage in inter-generational activities.

- A marketing and mobilization strategy will engage stakeholders (including government and non-government), that see the benefit of engaging volunteers in support of residents’ well-being and growth.
- Volunteers will also serve as liaison (or ambassadors) for educational and cultural outreach to schools, clinics and libraries to engage and raise awareness about Age Friendly Intergenerational Programs.

RSI 1b: Conduct training for volunteers and host organizations to build their technical capacity to expand and improve purposeful inter-generational engagement activities. Activities would include the following:

- Recruit and conduct initial screening/vetting of volunteers.
- Provide preliminary orientation and training for volunteers and hosts prior to matching.
- Design and implement a targeted training program to augment volunteers’ skills in coaching and mentoring (for example, specifically working with students and teachers to improve academic outcomes for students from K-12 in selected classrooms and communities, with a focus on disadvantaged students of all ages and backgrounds).
- Providing on-going “on-the-job” training to volunteers to help them succeed in their role.

RSI 1c: Expand awareness of and contributions to Age-Friendly Initiative in Howard County Public Schools (Elementary, Middle and High Schools) through incorporating “age awareness” classes and activities into the HCPSS curriculum and extra-curricular activities that help increase awareness about aging issues such as dementia, caregiving, budgeting (money management?), etc.

Students are educated about the Age-Friendly Initiative during school hours or in after-school programs.
• Teachers and school councilors become advocates of an Age-Friendly community through targeted activities that increase understanding of and visibility of this community.
• Students participate in a locally-designed Service-Learning program or event to earn service hours that would go toward their required 75 hours needed to graduate, and in which students would complete a project to offer some type of Age-Friendly benefit to the community, advocate for older adults, or find ways to enhance the quality of life for older adults. Examples include Infomercial graphic, excursions and conversations, beautify an aging friends garden or volunteer for a community sustainability project.

**RSI 1d: Provide age-friendly inter-generational opportunities for interaction with others through exercise programs, volunteering, and social events to bridge generations, dispel ageist myths and pre-conceptions while addressing loneliness and isolation.**

Howard County Government has committed to improve policies in diversity, inclusion and equity (DEI). DEI is a term used to describe programs and policies that encourage representation and participation of diverse groups of people, including people of different genders, races and ethnicities, abilities and disabilities, religions, cultures, ages, and sexual orientations. Reducing stereotypes and discrimination by age is one element of the focus on improved diversity, inclusion and equity.

Stereotyping diminishes the diversity and inherent value of the aging population and allows ageism to persist. Researchers at Cornell University have shown for the first time that it is possible to reduce ageist attitudes, prejudices and stereotypes through education and intergenerational contact. (https://www.sciencedaily.com/releases/2019/06/190621140328.htm).

Intergenerational programs provide experiences for children and older adults to bridge generations and learn to appreciate each other; dispelling ageist stereotypes enables both children and older adults to build a new frame of reference.

To help overcome stereotypes and support a positive view of aging, Howard County must work to ensure the county has accessible, vibrant programs in place which bridge generations gaps and embrace and support the physical, social and mental health needs of its steadily increasing older adult population. “Intergenerational programs not only bridge generation gaps, they give older adults the opportunity to share their
experiences and recognize the value of their contributions to our community. And older adults learn a lot about the younger generations as well, creating mutual respect and understanding. These programs challenge the belief that older and younger people should live and participate in spaces that are separate from one another. Providing opportunities for younger and older people to participate in intergenerational programs is one way to promote respectful relationships and enhance the quality of life and health of all generations.” (Challenging and Dismantling Ageist Attitudes, Beliefs, and Behaviors Through Intergenerational Programs, Innovation in Aging, Oxford University Press).

Thus, creating an age-friendly environment fosters a sense of belonging and creates feelings of self-worth and connectivity for all residents, regardless of age.

**RSI 2 Analyze and document the impact and value of intergenerational activities on all residents**

**RSI 2a: Document impact of intergenerational programs on all generations conducted through**

- Analyze best practices, looking at existing programs to find gaps. Programs should be developed to augment programs, bridge the gaps in the County, and expand best practices.
- Qualitative and other pre-and-post engagement measures should be defined and systematically examined in a periodic manner. Systematic Monitoring, Evaluation and Learning (MEL) through pre-and-post observations from respondents, and other evaluation tools and methods will help gauge program effectiveness, impact outcomes, and capacity development of volunteers, hosts, and beneficiaries.

**RSI 3 Improve existing practices in businesses, including use of accessibility features and design, staff training and marketing to address needs of older adults**

**RSI 3a: Develop and implement an Age Friendly Business certification program which includes considerations for customer service, marketing, ambience, design and accessibility, and age-friendly services and products.**

**Definition:** An Age-Friendly business is one which community residents of all ages and abilities can comfortably shop, dine, or receive services. These businesses would take deliberate actions to make their spaces and their operations more inclusive for
customers and patrons of all ages and abilities utilizing the Age-Friendly Checklist and associated Age Friendly Ambassador Program. The Age-Friendly Checklist is intended to foster a unified approach to challenge all local Howard County businesses to consider how they change policy and practices to enhance the quality of life for our aging population residents.

**Rationale:** Age-Friendly is a growing market as everyone wants to feel valued. Age-Friendly encourages intergenerational and multicultural understanding and works to eliminate ageism to ensure consistent levels of high-quality service for all ages. Currently, 21 percent of Howard County residents are over 60 years old, and in 25 years this number will increase to nearly 30 percent.¹ Based on these statistics, enhancing local business through integration of the Age-Friendly Checklist will bolster inclusiveness and sense of community.

¹ County Executive Ball Launches New Age-Friendly Howard County Initiative, December 3, 2019
https://www.howardcountymd.gov/News/ArticleID/1764/News120319

**Programmatic:** The primary steps involved for this initiative include gauging the voluntary interest of local businesses through their completion of an application. The business will then complete a self-assessment using the established Age-Friendly Business Checklist. Finally, an Age-Friendly Ambassador will then evaluate the business using the checklist and work collaboratively with the business to ensure best integration of the checklist criteria. If key criteria are met by the business, they will receive an Age-Friendly marketing decal to place in visible areas to identify they are an “Age-Friendly” business and the business name will be added to the list of Age-Friendly Businesses on the Chamber of Commerce website and www.howardcountymd.gov/agefriendly. Recertification will be required every two years.

The Age-Friendly application includes the following:
- Business Name, address, website, phone
- Name of Owner/Contact
- Brief description of business:
- Number of employees, type of customer service training offered.

Application must be signed by the authorized representative and sent to the Howard County Chamber of Commerce
Age-Friendly Business Checklist

Customer Service: Staff is trained to provide respectful and friendly customer service.

- Staff speak clearly and make eye contact.
- Staff are courteous, aware, knowledgeable and provide help.
- Customer feedback is actively sought (e.g. suggestion box).
- Staffing profile includes older people where possible.
- Where employees speak languages other than English, this is advertised and promoted to customers.

Marketing: Ensuring marketing and communications are age-friendly, easy to read, clear to understand, and the right information is provided when and where people need it.

- Fonts are large and clear, with a high color contrast between the text and background of promotional material.
- Advertisements and materials feature a full range of ages in materials and advertisements.
- Contact details are printed on all materials and are in an easy to find place.
- Business is well signed internally and externally.

Environment: As people age, many may experience a reduction in hearing and vision.

- Adequate lighting is provided throughout, particularly in entrances and exits.
- Excessive noise and loud music are minimized.
- Furnishings absorb excess sound and reduce echo.

Design and Accessibility: Ensuring the business is accessible will provide a more welcoming and pleasurable experience for everyone. The factors contributing to the accessibility of a building are not necessarily all in a business owner’s control, however there are some strategies most businesses can consider.

- Furniture with rounded edges to reduce possible bumps and grazes.
- Adequate space between and around furniture to maneuver.
- “Parking” area inside designated for mobility aids and scooters.
- Products popular with older people are within reach on shelves.
- Doors are lightweight or automatic.
- Trip/slip hazards are removed and/or minimized.
- Magnifying glass is available.
**Age-Friendly Services and Products**: Offering services such as these will ensure a dedicated older customer base.

- Delivery services.
- Age-Friendly discounts, menu options, special days or loyalty card.
- Advertising the availability of electrical charging spots so mobility scooters can be charged and/or joining the recharge scheme.
- Offering smaller quantities at competitive prices.
- Personal service is available as an alternative to self-checkouts.
Housing

H 1  Modify covenants and zoning regulations to enhance and facilitate Aging in Place

H 1a: Permit compatible age-restricted housing of a similar density to the underlying multifamily zone: examples, CAC & TOD.

Compatible older adult housing of a similar density to the underlying zone should be permitted in any zone that allows multi-family housing, such as Corridor Activity Center along U.S. 1 and Transit Oriented Development TOD zones. Some zones do not permit this, and it may simply be an oversight.

H 1b: Recommend that age-restricted housing be near amenities like shopping and with good traffic control and signage.

It is important for age-restricted housing, older adult communities, and other housing for older adults to be located near commercial amenities where residents can shop for food, medicines, use a bank or get a haircut, among other things. This is an important consideration for quality of life for those residents and a great way to encourage older adults to stay in Howard County. It is also important that age-restricted housing be located near less congested, well-designed intersections and lighted roads with easily visible signs.

H 1c: Make New Town requirements consistent with zones outside, as with group homes for up to 16; provide for conditional uses in New Town.

The Housing Work Group believes that zoning standards should be comparable inside the New Town district and outside it. Currently, for example, small group homes of up to 16 people are allowed outside New Town as a conditional use, but only homes of up to 8 people are allowed inside New Town. Secondly, there are no conditional uses inside Columbia, which has a completely different process for zoning. For another example, consider the various requirements for MIHU housing outside Columbia vs. inside Columbia, where “affordable” housing is only required in the downtown redevelopment area. There is zero requirement for affordable housing in all of the rest of Columbia, even as several village centers are going through major redevelopment. There are over 60 small group homes in the county, and sub-group members have driven by several and note they are indistinguishable from other homes in their neighborhoods. Outside New Town homes with up to 8 residents are allowed by right.
Homes for 9-16 residents are allowed by conditional use on at least one acre of land. That requires a public hearing that takes parking and other features into account. The sub-group contends these rules are reasonable.

Within Columbia’s New Town district, there is no mention of homes for 9-16 residents. Even small homes must be approved by the various village boards and are often rejected and treated as an in-home business. Also, they must be re-approved annually. Some covenants and community bylaws don’t allow them, although covenants can apply outside New Town as well.

As a result, there are fewer such homes in Columbia and the subgroup encourages the Columbia Association to help make New Town more friendly to age-friendly housing such as small assisted living facilities that provide 24-hour supervision and person care to individuals in a community setting.

**H 1d: Review covenants that prevent age-friendly housing and ban such covenants.**

Age-Friendly communities are inclusive and considerate of the perspectives of all residents, of all ages, and all persuasions. Age-Friendly communities encourage and benefit from diverse citizen engagement by including residents in a process to identify the community’s needs and develop and implement an action plan to address those needs.²

The County should review covenants, especially in newer communities, which sometimes are a barrier to many age-friendly housing types, such as small group homes. A detailed look at such covenants should be undertaken and action taken to prohibit them.

**H 1e: Review consistency in requirements for Moderate Income Housing Units (MIHU) in all zoning categories that allow attached dwellings or multi-family dwellings.**

Current zoning regulations are not consistent across zones in requirements for MIHU. To maximize provisions for the many residents who need them, these requirements should be in all residential zones, including New Town, that allow attached and multi-family dwellings, and should be based on data about household incomes in the county.
H 1f: Allow nursing homes and assisted living facilities in (institutional) overlay and New Town zones

The current regulations seem inconsistent in not allowing nursing homes in Institutional Overlay and New Town zones, where they would be appropriate. While the State of Maryland ultimately determines whether a nursing home can be built in a given jurisdiction/area (based on a Certificate of Need) restricting the location by zoning regulations may not allow for facilities to be located in the neighborhoods most in need.

H 1g: Support in-law suites/Accessory Dwelling Units (ADUs) by

- Creating a by-right regulatory approval of in-law suites and ADUs
- Creating a Howard County ADU facilitation program similar to Montgomery County, MD, and other counties around the country may be used as examples.

Accessory Dwelling Units (ADUs) are in-law suites attached to an existing home or an auxiliary building on the property. In-law suites should allow a separate entrance. A facilitation program for these uses should be developed.

H 2 Expand, and promote, existing services within OAI to facilitate Aging in Place (AIP)

H 2a: Promote Aging in Place/Same Home Programs to include:

- Expansion of current Office on Aging and Independence webpage to a hub model including community-wide resources on aging in place/aging in community
- An increase in promotion and use of existing aging-in-place services

The Office on Aging and Independence and other agencies have programs in place for many services for older adults who wish to stay in their home or apartment. The usage of these services is relatively low when compared with the scope of the many issues that coalesce to enable or prevent an individual to age in place. Some services are means-tested, others voluntary, and many individuals avoid learning of alternatives until a crisis or significant change occurs. The process of education will need to be ongoing. Demystifying the options to modify one’s home, and/or look for necessary services or housing options in the community will need to be intentional and consistent across age cohorts. An information hub that promotes all programs in the community (both government and community organization) would be helpful to older adults as they age.
in their current homes. Increased advertising opportunities and modalities are recommended.

**H 2b: Improve access to home safety assessment for older adults.**

- Expansion of Office on Aging and Independence home visit occupational therapy assessment services to the broader community
- Expansion of training and assistance around fall prevention and home modification
- An increase in promotion and use of existing aging-in-place services

This recommendation seeks to expand occupational therapist home visits to those beyond the current needs-based (means-tested) visits. Increased funding for this program could prevent falls leading to abrupt housing changes and financial instability. Promote fall prevention guidelines with brochures, use of the information hub, and other modalities.

**H 3 Enhance the capacity for individuals to remain safe and independent in the community through universal design in construction**

**H3a: Revise/update the Howard County Universal Design Guidelines established in 2006**

**H3b: Require builders and homeowners to follow the revised Universal Design Guidelines for all new and rehabilitated, remodeled or redesigned age-restricted housing**

**H3c: Require all new housing to follow a minimal set of the revised Universal Design Guidelines. All housing (single family, multi-family, rental) that is being rehabbed, redesigned or remodeled should follow at least minimal elements of Universal Design and advanced Universal Design elements to the degree practicable**

A [Research Report](#) by the National Conference of State Legislatures and the AARP Public Policy Institute found that nearly 90 percent of people over age 65 want to stay in their home for as long as possible, and 80 percent believe their current residence is where they will always live. However, for older adults to age in place, their physical and service environment must be accommodating. Unfortunately, many homes are not age friendly and have no elements of universal design. Universal design, also called barrier-free design, focuses on making the house safe and accessible for everyone, regardless
of age, physical ability, or stature. Universal design elements in homes and apartments contribute to age-friendly communities, multi-generational households, and they increase the independence of persons with disabilities. Howard County is currently embarking on a once-a-decade zoning review. This is the time to set in place housing amenable to an aging population and one that recognizes that Universal Design elements serve the entire lifespan, support independence, improve functionality, increase the value of the home and expand the number of individuals who can purchase the home at time of sale.

There are many examples of Universal Design elements that are beneficial. Blocking in the walls that would support grab bars in the shower present no additional cost when building but considerable cost when remodeling. Grab bars are helpful and used by individuals of all generations. No step, or low threshold, showers are beneficial to all generations. No step entrances are beneficial for homeowners at all stages of life—whether using for a stroller with infants or a wheelchair for individuals of any age. Lever handles on doors and rocker light switches are ideal for individuals with severe arthritis or impairments due to degenerative conditions but they are equally helpful for parents whose hands are full with small children or groceries.

For housing that targets the 55+ community, all the elements of universal design should be mandatory. Given the high percentage of people who want to age in their homes, this part of new housing stock should have elements of universal design. A fall, an accident, a malady could happen at any time in this population and their future needs should be anticipated from the time of construction. Rehabilitation of this type of existing housing should be required to include universal design mandatory guidelines.

Finally, the Universal Design Guidelines followed by Howard County Department of Inspection, Licenses and Permits must be revised. They were adopted in 2006. At that time, it was determined to mandate only certain elements of universal design, as a way to introduce these elements to developers and the older adult buyers and provide safe, attractive homes in which individuals could age in place. Fourteen years later, these elements are a top concern for housing for older adults according to experts in the field of aging, occupational therapists and others interested in ways to assist individuals to age in place and age in community. Expanding the number and complexity of Universal Design features in housing designed for older adults works to further ensure safety, comfort, inclusivity and ability to remain active residents of the community.
The Universal Design Guidelines should be revised to incentivize the inclusion of the following elements for housing targeted for the older adult population.

- 36-inch interior doorways to accommodate electric mobility devices (should they be needed by residents or visitors)
- Turnaround space in bathrooms and kitchens should be 5 feet by 5 feet
- Grab bars in all showers
- No threshold showers
- Showers large enough to accommodate a shower chair or have a built-in wall-hung bench
- No threshold entryways with a wide (36” or wider) door and a foyer with space enough to enter and turn using an electric mobility device

**H 4  Enhance planning for older adults (e.g., Comprehensive Housing Plan, include needs of older adults in general plan)**

**H 4a: Create an Older Adult Housing Plan that includes:**

- An analysis of current and planned future housing for older adults
- An analysis of health requirements in housing for older adults
- Coordination with and taking advantage of planning by the Health Department and Howard County General Hospital
- Identification of options to increase older adult housing based on identified gaps

Housing needs for older adults are different due to changing health needs of these individuals. The last plan was done in 2004. Much has changed. The need is to address capacity and variety of older adult housing and details on the number, type of facilities, location and proximity to services is needed.

There is a need for a specific Older Adult Housing Plan. The percentage of older adults living in the county is rising and will continue to rise. Older individuals must make choices about housing based on both financial and health needs in order to stay in the county. The plan should support a variety of choices to support preference and the need for a continuum of care.
H 4b: Implement a specific older adult housing analysis in the HoCo by Design project that includes:

- The findings from the Older Adult Housing Plan
- An analysis of current and planned future housing
- Coordination with and taking advantage of planning by the Health Department and Howard County General Hospital
- The recommendations from the Age Friendly Housing Workgroup

Older adult housing needs to be included in HoCo Design and other community planning activities. This includes use of the planning insights of health needs contained in the planning for Howard County General Hospital, the Howard County Health Department, and the coordinated plan of the Local Health Improvement Coalition. The current silo approach separates analysis of changing health needs from analysis of changing housing needs. An integrated analysis is needed. This analysis should include insights and analysis of the social determinants of health and the role of housing.

Once each decade, Howard County updates its general plan, a long-range, visionary document that guides land use, growth and development decisions. From now through the end of 2021, the county’s Department of Planning and Zoning is leading a community outreach effort to create a new general plan, called HoCo By Design. County officials want to hear from every voice to create one vision for the new general plan. That effort should include analyses of older adult housing and health requirements and include the proposed Older Adult Housing Plan and the recommendations of the Age-Friendly Housing Workgroup. Coordination with the planning done by Howard County General Hospital and the Howard County Health Department is suggested.

H 5 Expand access to information about housing options and choices, including nursing homes, continuing care facilities and assisted living facilities

H5a: Create an older adult housing coordination, education, and information program that has the following elements:

- Expands available training to public about housing choices to create consistent and widespread information throughout the county
- Creates an expanded assessment and referral program supporting Senior choices of facilities
• Creates an information hub with enhanced web site and access to scope of services and quality ratings
• Develops a community peer sharing program supporting senior selection of facilities

Methods to support education and decision making about choices of older adult housing are inadequate. Decisions about when or if independent, 55+, assisted living, nursing, Continuing Care Retirement Communities are the right fit are complex. Easily available information and training is needed. A county-wide education program is needed to navigate the choices. A central hub of information would also be helpful to older adults as needs change. A peer sharing program is suggested.

H 6 Develop program that offers advice to homeowners on how to make modifications to facilitate Aging in Place (AIP)

H6a: Reduce barriers to home modification to include:

• Development of a home modification advisory program providing coordination between assessment, construction, counseling & education.
• Maintain an inventory of vetted home construction vendors
• Promote self-help training options on home modification assessments and available tools
• Streamline process for Livable Homes Tax Credit

Older adults who want to stay in their homes need an advisory program for modifications from design, through construction. They need an assessment for modifications and a vetted set of contractors to do the construction work. Available and developed self-assessment and tools should be promoted in Howard County to help older adults make decisions for today and tomorrow. Finally, streamline the process for obtaining the Livable Homes Tax credit.

H 7 Develop consistent permitting requirements across all jurisdictions within the County, that remove barriers to home modifications that facilitate Aging in Place (AIP)

H 7a: Reduce regulatory barriers preventing widespread home modifications specifically designed for aging in place by

• Developing coordinated and consistent policies impacting both the inside and the outside of the house
• Creating consistent policies across Howard County government, Columbia Association and Home Ownership Associations that supports home modifications that support aging in place and promote safe home modifications (e.g. ramps, no-step entrances, both inside and outside the house.
• Creating by-right regulatory approval of home modifications to promote safe aging in place in spaces such as, but not limited to, Level 1- basement, sun rooms, and garages. Allow cooking facilities.
• Creating by-right regulatory approval of home modifications. Level 2- home additions and split homes with external access for renters of family.

There are regulatory barriers and inconsistent policies that prevent significant home modifications. Policies related to Columbia Association community standards as well as Homeowners Associations are often barriers to modifications. Allow modifications to garages, sunrooms, etc. for older adult housing within a home. Kitchen facilities should be allowed. Permit a separate entrance, auxiliary buildings on a property as well as ready-to-use prefabricated universally-designed additions to homes. A homeowner may want to modify their home to allow for older parents or relatives to live with them in safety. Their own home may be difficult to modify but permitting an alternate use for a sunroom or a garage or adding a prefabricated universal design module or an auxiliary building allows the family to help their aging relatives.

H 8 Establish and maintain consistent guidance about housing and zoning requirements within and across County departments

During the study and during other interactions with the county numerous examples of inconsistent regulations or guidance were found, e.g., a use allowed in one zone but not allowed in a very similar zone or were given information from one department that contradicted that given by another department. Corrections for some of those examples were noted in other recommendations, but the subgroup strongly recommends system-wide attention to correcting such items and preventing them in the future.

H 9 Expand support for communities that want to develop “village models”

H9a: Develop a program to support villages and to encourage the establishment of additional villages, particularly in neighborhoods that are not well connected to services. Potential model is “village model” (as established in Boston, 2001).
Most older adults will choose to age in place. The Village concept aims to support community members who are aging in place with services provided within the community or through service contracts. A program is needed to develop and support villages.

H 10  Modify regulations to facilitate home sharing (program where unrelated adults can share housing with older adults)

H10a: Support home sharing for both financial viability and to lessen isolation by:

- Creating a Howard County government facilitation program and/or allowing existing programs such as Silvernest.
- Modifying regulations to allow older adults to home share without going through commercial licensing procedures through the Dept of Licensing and Inspection.
- Helping establish a process by which potential roommates/housemates are screened.

Home sharing is very attractive to older adults. A family member or trusted adult in the home may be helpful for financial reasons, to reduce isolation and to help with care of the older adult. A program similar to Montgomery County, MD is suggested to promote home sharing. Modify regulations to allow home sharing without going through licensing and inspection. Do not limit home sharing to one adult.

H 11  Expand financial supports in the form of tax credits and rent subsidies to older adults

H 11a: Expand housing related financial flexibility by

- Promoting government programs and validated home equity and reverse mortgage information sources.
- Expanding Older Adult tax credits. Improve access to information, streamline application procedures, review eligibility criteria, and improve participation in these programs.
- Develop and fund specific programs for low income Older Adult renters in the form of rental assistance or grants.

For older adults who own their homes, financial literacy is important for any modifications they may need to make as well as to financially stay in the home. Older
adults may not be aware of options. A program addressing financial literacy is recommended. Older Adult Tax credits need to be expanded. Many older adults are not aware of existing programs or have difficulty with the application process. Eligibility criteria for some programs should be reviewed with an eye to expansion. Finally, and most importantly, many older adults are long term renters. They do not qualify or homeowner-based tax credits. Their rent continues to increase at a rate higher than any increase in Social Security benefits. The County must provide rental assistance and direct grants specific to older adults who rent their homes.

H 12 Create advisory body to oversee housing related issues, including ongoing improvements and gaps and resources for providers of congregate housing

H12a: Develops provider coordination and cooperation programs which allows practitioners to identify gaps, improve practices, and provide support around gap areas. A model is the Local Health Improvement Coalition (LHIC).

Finally, a program for actual providers of congregate housing to meet and identify gaps and improve practices will improve all the housing in the county. The LHIC model is suggested.

H 12b: Creation of coordination and sharing program between aging in place program stakeholders. Create program similar to LHIC (local health improvement coalition- county wide private/public program)

Finally, a stakeholder group that shares information related to older adult services with the purpose of continuous improvement and innovation is recommended.

H 13 Provide financial literacy education to older adults

H 13a: Expanding training and consulting on financial aspects of housing.

For older adults who own their homes, financial literacy is important for any modifications they may need to make as well as to financially stay in the home. Older adults may not be aware of options. A program addressing financial literacy is recommended.

H 14 Advocate for changes in state funding formulas as it relates to construction and funding of subsidized older adult housing
H14a: Recruit Howard County’s state legislators to have the state change funding formulas for subsidized older adult apartment housing to enable more projects.

State tax credit formulas no longer favor construction of moderate income older adult apartment buildings. With the number of older adults who need below-market rents to stay in the county growing, this will become a larger problem. Although this does not affect County zoning laws, it is an important element in housing for older adults going forward. As a policy recommendation, county administration officials should recruit state legislators to seek a change in state formulas to enable more subsidized buildings to be built. In addition, projects for MIHU rentals that are income restricted but not subsidized should be increased for older adults in this moderate-income group.
Social Participation

SP 1  Enhance outreach to community so that people are aware of what is available, as well as learn what the public wants

SP 1a:  Enhance outreach to the community

- Advocate for a coordinated and resourced integrative marketing program to overcome the negative perceptions of activities held in 50+ Centers.
- Recommend that extra agency marketing resources be committed to support wider dissemination of the breadth of activities available to the community.
- Expand linkages to include businesses and non-profit organizations, for recommendations to implement activities that best reach a broad and inclusive community.

The capacity of the 50+ Centers may be more fully achieved with a greater focus on community-wide marketing efforts regarding the programs and amenities available. The current resources for marketing may be insufficient to reach a broad set of participants. While there is a plethora of activities being offered by 50+ Centers, the larger community is not often aware of them. Increased meaningful engagement could be realized with a multi-pronged marketing approach.

SP 1b:  Building Connections:

- Broaden current opportunities for inclusive social connection with special attention paid to underserved communities.
- Engage the Commission on Aging in advocacy and marketing efforts to promote programs and initiatives for inclusive community involvement.
- Consider enlisting the COA for the ongoing task of reporting or recommending needs of the older adult community that could be addressed, specifically at the 50+ centers (for the purpose of this recommendation).

Opportunities to network and partner with other organizations and entities (for-profit and non-profit organizations) may not be fully realized, thereby limiting awareness and engagement. Further development of networking partnerships will enhance participation and expand programmatic diversity which could, in turn, help attract underserved communities. Enhanced engagement with the Commission on Aging will inform programming to support its broader goals.
SP 2  Create mechanism to enhance the publics ability to provide input to 50+ Center activities

SP 2a: Communication:
Create a structure to foster two-way communication that provides opportunities for users to suggest activities and offer feedback on programming.

Open and receptive communication between the 50+ centers and the market they serve will expand opportunities for meaningful engagement. While there has been an informal feedback process in place, a structured feedback mechanism can foster more consistent communication. Underrepresented communities or subgroups will have the opportunity to have their needs and interests addressed through center offerings. This will build upon current outreach that not only includes technology, but other modalities such as telephones, printed newsletters, mailings, and where possible, in-person dissemination of information.

SP 3  Expand range and types of activities through 50+ Centers, including activities outside of the physical centers.

SP 3a: Senior Centers Without Walls.

There is a program called Senior Centers Without Walls based in San Francisco that is organized by the American Society on Aging and listed in the Solutions Database for the AARP Foundation. This program, which has been in existence since 2004, conducts annual surveys and found the following data in their 2017 survey: “SCWW has improved the following areas of my life: Intellectual stimulation – 83%, Social connections – 76%, Feeling valued – 66%, Improved mental health – 63%, Provided critical resources – 51%, Improved physical health – 35%, 47% participate weekly, and 28% participate daily, 85% believe that SCWW has improved the quality of their lives, 64% believe that SCWW has helped them remain independent.” (1)

The onset of COVID-19 has brought about the need for remote interaction even more so than in the past. Senior centers are offering a variety of virtual programs including conference calls, virtual meetings, and livestreamed programs using social media. This mode of interaction is likely here to stay and the National Council on Aging has developed best practices to guide agencies seeking to start or continue these types of programs (2).
Frederick County, MD has a separate coordinator in charge of its Senior Center Without Walls. This type of program leans heavily on both an extensive newsletter with activities for participants to complete at home and the staff traveling to community-based groups and organizations to give presentations (3).

In Fairfax County, VA, the 50+ centers do not have buildings designated exclusively for the use of 50+ programs. Their Centers Without Walls rely on using existing buildings throughout the community which include churches, police stations, libraries, and historic properties. In this way, the 50+ Centers are bringing the activities to the community where people live rather than asking people to come to the centers (4).

Increasing the number of evening and weekend hours at 50+ Centers would also be a boon to usage. According to the US Census Bureau, the average age of retirement for men is 65 and for women it is 63 (5). To encourage usage by the segment of the population that is 50-65, offering hours that are outside of the traditional work day would eliminate one barrier to their participation.

**SP 4 Develop, and promote, Age-Friendly Ambassador program to promote social participation**

**SP 4a: Ambassadors will undergo initial screening/vetting, orientation, and must be prepared to provide a commitment to the program that includes but is not limited to ongoing training, identifying and addressing community issues and networking with other ambassadors.**

Create a process and develop a position description for recruiting individuals who are interested in serving as Ambassadors for Age-Friendly initiatives designed to reduce social isolation and loneliness among the older adults in Howard County. The role of the Age-Friendly Ambassador requires dedication and commitment to 1) creatively addressing the program goals, 2) meeting with other ambassadors regularly to network and provide support, and 3) participating in on-going training programs. The position description will identify the key elements that interested individuals must address in their applications, including a clear description of the professional and volunteer experiences and skill set that speak to the ability to serve as an Age-Friendly Ambassador in the Howard County community. Qualified applicants will be interviewed by a panel composed of staff with the Office on Aging and Independence, Commission on Aging and other agencies and organizations involved in Age-Friendly. The final interview will require applicants to role play how they will resolve issues they could
possibly encounter as Age-Friendly Ambassadors. Lessons learned from Howard County Legacy Leadership Institute for the Environment (Hollie) may provide a model for recruiting and developing volunteers (7).

**SP 4b: Develop an infrastructure (to include but not be limited to website, social media, telephone) to allow community members to request contact with an ambassador.** Age-Friendly Ambassadors develop linkages with HOAs, 55+ community dwellings, faith communities, community organizations, etc., to inform about community activities, and to identify individuals at risk of social isolation.

Developing and maintaining a well-informed and energized cadre of volunteers to serve as information and outreach ambassadors will require a coordinated volunteer application and assignment system that incorporates technology and personnel oversight.

Ambassadors will be assigned by higher-level volunteer Lead Ambassadors areas/entities for which they are responsible to regularly visit to distribute information about resources and services and to obtain information about unmet needs. These Lead Ambassadors are also responsible for assisting in securing speakers for monthly training meetings and determining the needs of the assigned region. The Lead Ambassadors report directly to the Age-Friendly Howard County Manager.

Information about the roles of ambassadors will be available on the Age-Friendly Howard County websites and provided in written form at all outreach functions to encourage residents to self-select the services of an ambassador. A request form will be provided on the Age-Friendly website to allow individuals to request the services of an ambassador. Age-Friendly assigned staff will direct Lead Ambassadors to appoint local ambassadors to specific assignments. Phone calls to the Age-Friendly Manager or any partner will be directed to an appropriate ambassador.

**SP 4c: Make an efficient and easy system for accessing information on community activities and needs available to ambassadors.**

Ambassadors need to have access to ongoing and planned community activities and needs in order to informatively interact with community members. Rather than generating a new database, this program needs an information structure that provides this information through ongoing web-linked sources and inputs from community organizations, such as the community activity database.
SP 4d: Develop evaluation program to measure effectiveness of Age-Friendly Ambassadors' activities.

Quantitative measures, such as time, number of contacts and interactions, social network scales such as Lubben Social Network Scale (8) or the Social Network Index (9) and analytic procedures need to be established in order to assess the effectiveness of the program. Qualitative evaluations and participant feedback also need to be utilized to assess and direct the development of the project. The purpose of the evaluation program is to promote monitoring, evaluation and learning (MEL) that take into account both supply and demand side measures of progress and impact.
Transportation

T 1  Promote and fund alternative transportation options to supplement traditional fixed route transit, paratransit and single occupancy vehicle trips.

T 1a: Improve access to mobility service sharing companies (e.g., Lyft or Uber and GoGo Grandparent) to expand usage and explore financial incentives to help fund transportation for older adults and economically disadvantaged populations.

This work would be led by the Howard County Office of Transportation and would involve engaging Transportation Network Companies (Lyft, Uber) as partner(s). Other organizations that have built services on top of TNC platforms (like GoGo Grandparent) that provide specialized services to targeted demographics should also be considered and evaluated. Because these services are targeted to meet the needs of older adult and economically disadvantaged groups, the Department of Community Resources & Services needs to be closely involved with the procurement, creation and ongoing provisioning of service.

T 1b: Promote Neighbor Ride, as a transportation provider and a volunteer opportunity and increase collaboration with community-based organizations with access to underutilized vehicles.

The existing partnership between Neighbor Ride and Howard County Department of Community Resources & Services (DCRS) should be leveraged here. Through its Community Services Partnership program, DCRS has provided ongoing operational support of Neighbor Ride for numerous years and the county has provided project and initiative support of Neighbor Ride’s capacity building efforts including on an initiative-by-initiative basis. This includes funding support for Neighbor Ride’s operational database (Ride Match) and most recently Neighbor Ride’s ASSIST service to help local government and other organizations better service their older adult clients through transportation and/or delivery service. Numerous other organizations should be involved in this process as well. This includes faith organizations, older adult housing communities, other non-profits, and organizations with transportation assets.
Next Steps:

- Promote and support community-based organizations to become engaged in these efforts.
- Implement awareness efforts of these services and opportunities for new partnerships and capacity expansion.
- Encourage involvement and provide funding to support these efforts.

**T 1c: Issue new procurement for supplemental paratransit services contract with taxi and/or ride sharing companies.**

The Office of Transportation and the Regional Transportation Agency of Central Maryland (RTA) are the lead organizations for this effort and should also involve organizations within the county that have paratransit / disability accessible vehicles. Transportation Network Companies should also be assessed for paratransit capabilities they can provide.

Next Steps:

- RTA to issue procurement for supplemental paratransit services in time for increased demand for services as the impact of the pandemic lessens (projected for Fall of 2021)
- Identify organizations with assets (paratransit vehicles) that could provide supplemental services
- Identify a community group to manage and provide logistics
- Encourage involvement and identify initial level of financial need and potential sources of funding and/or State or Federal grant opportunities to support these efforts.

**T 1d: Ensure that Maryland Access Point (information and referral) staff and other information providers (faith communities & other non-profits) are trained and up to date on all transportation options available to older adults**

Howard County DCRS would be in the lead on this recommendation in terms of collection and distribution of information regarding transportation services. Within the community, all transportation providers and community groups representing the older adult and/or at-risk populations should be involved from both providing information on services and sharing information about services.
Next Steps:

- Collect and maintain information about various service providers.
- Identify a single point of contact (likely Maryland Access Point) to provide service and insure staff is trained
- Conduct county-wide marketing and awareness campaign about various services and role of MAP as central point of contact.

**T 2** Develop a workgroup to explore alternatives to transportation (e.g., good and services delivered directly to people, virtual socialization)

**T 2a:** Explore alternative service delivery options - consider when things can be brought to people rather than transporting people to places for things

Because this service would be targeted to older adults and other at-risk populations, Howard County DCRS is suggested as the lead role. The lead would work to recruit organizations that could explore alternative (non-transportation reliant) methods for providing their goods or services. These could include food sources and medical services. This would also include organizations that provide delivery services from grocery store chains, to Lyft/Uber, Door Dash to non-profits like Neighbor Ride.

In addition to the work tied to the specific initiatives above, there are several broader level next steps as well. These broader next steps include:

- Identify types of organizations that are a potential fit to be involved with initiatives as well as potential candidate organizations
- Hold information sessions to invite candidate organizations and any others interested to learn more.
- Collect information about any existing services that are learned about during this process.
- Research and identify potential funding sources
- Identify tools/systems, etc. that could be useful for managing transportation data – like eligibility, schedules, etc.

**T 3** Maintain and expand affordable transit options and/or alternatives to underserved areas/corridors with densities and populations that will benefit from access to transit
Howard County oversees the management and operations of public transit through the Office of Transportation and a contract with transportation services under the Central Maryland Regional Transportation Agency (RTA) [RTA of Central Maryland website](#). The RTA provides fixed route and paratransit services in Howard County, Anne Arundel County, Prince George’s County and the City of Laurel. Funding is shared by the partner jurisdictions with support from federal and state sources to offset the gap between farebox revenue and capital and operating costs. The RTA runs 16 fixed routes, provides ADA complementary paratransit service and general paratransit (GPT) service. The ADA complementary paratransit service is available for individuals with a disability that have trips that are within ¾ a mile of an RTA fixed-route. The GPT service is available in Howard County for those who are 60 years or older and individuals ages 18-59 with a disability and offers transportation in areas outside of the fixed route service area for eligible trip purposes such as employment, education (colleges), medical, senior centers, and social service agencies.

**T3a: Seek federal, statewide (grants) and/or regional funding solutions (legislation) in order to support implementation of at least 50 percent of the service recommended by the 2018 Transit Development Plan**

The Age-Friendly work group recommends that the County focus on implementation of up to 50 percent of the recommended routes and would note that the service to the Howard County School System headquarters building has already been prioritized by the County and that the Central Maryland Regional Transit Plan adopted in October 2020 has identified an East West Corridor between Ellicott City and the Baltimore Convention Center as a high priority route. Therefore, service to Catonsville is also a logical high priority corridor to begin establishing more reliable transit service in the corridor. Finally, given the recent expansion of Montgomery County’s Express Bus “Flash” service between Silver Spring and Burtonsville, the County should consider prioritizing expanded service between Columbia and Maple Lawn.

Identifying additional funding sources will be key to implementing transit service expansion in Howard County. There are four main funding opportunities that should be explored to implement the services recommended above.

1) Partnerships with Neighboring Jurisdictions
2) Partnerships with the private sector
3) Exploration of Regional Funding Solutions
4) Increased federal funding opportunities through new federal earmarking (capital) and transportation reauthorization policies being considered for enactment in late 2021.

Partnerships with Neighboring Jurisdictions and Transit Connections to Catonsville and Burtonsville will provide increased opportunities for transit support from neighboring jurisdictions and the State of Maryland as Howard County works to improve connections toward both Washington DC and the Baltimore Metropolitan Region. Trips to the County’s neighboring urbanized areas represented two-thirds of the commute travel in the county prior to the pandemic and would allow for increased access to jobs by both residents and employees that are more likely to depend on transit.

Partnerships with commercial interests in Maple Lawn and Downtown Columbia which are required to fund certain transportation demand activities will allow the County to experiment with new services and/or partial offset costs for either transit service or first and last mile solutions such as ride share, bike share or e-scooter sharing companies.

Regional funding solutions are currently being studied by the Baltimore Metropolitan Council (BMC) in response to State Legislation. Significant financial data and an evaluation of peer regions is taking place in early 2021 with a report due in July 2021. Howard County should actively participate in these studies to ensure County needs and interests are incorporated to the final report. The BMC report is likely to receive attention from state elected officials and those running for Governor in 2022.

Federal funding opportunities are increasing in 2021 with the changes in both the executive and legislative branches of the federal government. Howard County should continue to advocate for programmatic changes that will create more funding opportunities that will benefit transit and first and last mile connections to transit.

**T3b: Improve older adult and persons with disabilities’ access to and understanding of technology to access services virtually (e.g. telemedicine) thereby reducing physical trips.**

The TDP identifies options to address the high cost and rising demand for demand-response services, suggests focusing mobility services to where needs are greatest, encouraging paratransit riders to use fixed routes, and ensuring long-term program financial stability. The TDP recommends more detailed discussions with affected communities but includes no specific proposals for immediate implementation. Much of
this effort will need to be undertaken by agencies, faith-based organizations and private sector entities outside of the Office of Transportation and the RTA but both OOT and RTA can place supportive roles in order to communicate the importance of these alternatives to reduced expenses for both transit customers and providers. Widespread availability of broadband internet access will also help facilitate replacing trips with online services.

T 4  Implement Howard County Complete Streets Policy to ensure safer mobility and access to community services, increase investment in areas with underserved populations, including older adults, and encourage alternatives to single occupancy vehicles.

Complete Streets are streets designed for all users, no matter their mode of transportation, age or ability. According to the National Complete Streets Coalition, more than 1600 jurisdictions have adopted Complete Streets policies in the United States. In Maryland, Baltimore City, Montgomery County, Anne Arundel County and Prince George’s County as well as multiple municipalities now embrace Complete Streets to one degree or another.

Complete Streets facilitates connectivity, mobility and access for public transportation, bicycling, walking and other alternative transportation methods. In Howard County, equity is at the center of this policy, ensuring that communities with underserved populations, (e.g. communities of color, older adults, persons with disabilities) receive, at minimum, equivalent priority with design and implementation.

On October 7, 2019, the Howard County Council unanimously adopted a Complete Streets policy. County Executive Ball introduced this resolution, “to advance the vision of safe streets for all in Howard County.” Paired with historic funding for biking and walking infrastructure, County Executive Ball is delivering on this promise to create safer and accessible streets for all users.

To ensure timely completion of policy deliverables, the Complete Streets Implementation Team (CSIT) includes both public agency and community representatives. The Complete Streets Implementation Team is overseeing the revision of the Howard County Design Manual, creating new standards for community engagement for transportation projects, recommending new policies for pedestrian infrastructure, land use planning and zoning as well as an equitable prioritization process for proposed projects. Complete Streets is a top priority for the Administration,
requiring the cooperation and support of the Office of Transportation, Department of Public Works, Department of Planning and Zoning, as well as Howard County stakeholders, including residents.

**T4a: Complete Design Manual Updates by fall 2021 and promulgate new Development Regulations in support of new Design Manual elements by summer 2022.**

CSIT is on track to complete Design Manual updates by fall 2021, which will help inform new Development Regulations in support of these new elements by summer 2022. Design manual revisions are currently underway as well as potential transportation planning modifications.

**T4b: Implement Transportation Improvement Prioritization (TIPS)**

The Transportation Improvement Prioritization Process was outlined by CSIT. It will score candidate transportation projects using four primary categories: (1) multimodal safety and access, (2) equity, (3) crash history (or collision experience), and (4) system preservation/maintenance. Bonus points are provided for those projects that leverage funding from non-County sources. For new projects, TIPS will be used to ensure communities with higher concentrations of underserved populations are prioritized.

**T4c: Implement a more inclusive Community Engagement Process (CEP) to advance age-friendly transportation projects.**

The Complete Streets Community Engagement Plan was finalized in October 2020. The plan includes goals, objectives, performance measures, processes and strategies that will increase feedback and engagement on transportation projects in Howard County. The CEP will use an index to ensure population groups including older adults are prioritized within the community engagement process. As part of the process, Howard County will send communications to community organizations that serve older adults and underserved populations and use engagement strategies that will allow everyone to inform transportation projects.
T 5 Develop and provide transportation training (e.g., transit scheduling, payment)

T5a: Partner with older adult organizations and communities in order to train and educate transit patrons to utilize new apps for transit scheduling, payment and bus route status.

Howard County has a few options for transportation available for older adults, persons with disabilities and those with economic and other challenges. The transportation options for these individuals are not easily determined and promoted on the websites sponsored by the County. Currently there are no formal travel training programs offered in the County.

There are new apps to facilitate travel, such as the new TransitApp on the RTA (Regional Transit Administration’s) website. The County should highlight these resources as well as the resources on the Howard County Office of Transportation (OOT), the RTA, as well as other websites (AARP, etc.) thereby promoting travel options.

Accessible Resources for Independence Inc (ARI) is one non-profit organization providing assistance to the disabled wishing to live independently in the community as well as information and referral.

ARI, however, was unsuccessful in receiving federal funding for their travel training efforts in 2020. This oversight affects the disabled, many of whom are older adults. It is recommended that RTA, The Maryland Transit Authority (MTA) and the Howard County Office of Transportation (OOT) coordinate with ARI and similar non-profits to enhance travel training services as well as advocate for ARI’s travel training funding.

Fact sheets highlighting resources available to older adults, e.g., RTA Mobility, fixed route, Neighbor Ride, taxis, and on demand private transportation (Uber, Lyft, etc.) would be valuable tools to aid persons with disabilities and older adults. These fact sheets could be distributed on-line and in person at 50+ Centers, the Office on Aging and Independence and OOT websites, Howard Community College, 55+ residential communities, the Columbia Association, Maryland Access Point, Howard County Public Library System (HCPLS), DCRS Office on ADA Coordination, the Village in Howard County, non-profits, faith communities, HC Police Department Community Liaison and others. This document would be posted on OOT’s and the Age-Friendly websites in
English, Spanish, Korean and Chinese Translations for persons for whom English is a Second Language (ESLs).

Captioned streaming resources and accessible videos could be linked to and made accessible at stakeholder websites (OOT, RTA, OAI). Travel training, driver re-education and available travel options could also be featured. The OOT website includes a section marked “Supplemental Services” where all these links and other information on transportation options and available resources could be centralized. Perhaps as “Transportation and Driving Resources”.

It is also recommended that the OOT and OAI websites be more user-friendly and accessible for older adults and vision-impaired persons. The Mid-Atlantic ADA Center and vision-oriented organizations like the National Federation of the Blind, American Foundation for the Blind, etc. can provide guidance on age-friendly readability. (AARP website).

**T 6** Prioritize and implement elements of pedestrian and bicycle master plans (WalkHoward and BikeHoward) that address either increased walking/bicycling access to schools or increased access by older adults to services

WalkHoward, Howard County’s Pedestrian Master Plan (Adopted 2020) and BikeHoward, Howard County’s Bicycle Master Plan (Adopted 2016), together with other area master plans, corridor master plans, safety plans, transit development plans, and policies guide community and economic development and articulate goals for the County’s transportation system.

WalkHoward “sets forth a plan for implementing a connected, comfortable, and safe pedestrian network that accommodates all users.” It also provides recommendations for changes in policies, guidelines, and practices that affect the pedestrian network, and for programs that will encourage the network’s use. A map of the projects laid out in WalkHoward is found here. The WalkHoward website which allows the public to view recommendations and provide comment can be found here.

BikeHoward’s goals include: identifying and developing a safe, connected, Countywide bicycling system that facilitates recreational and transportation bicycling for all levels of ability, recommending policies and programs to support bicycling, including bikeway design, and building public support for implementation of the master plan.
**T 6a: Develop a scheduled funding and implementation plan for pedestrian and bicycle master plan improvements**

The [Howard County Office of Transportation](#) (OoT) is the lead agency responsible for the implementation of bicycle and pedestrian planning. Its mission is “to increase the efficiency and effectiveness of public transportation services, walking, and bicycling in and around Howard County ensuring that connectivity is front and center in land use planning and site development.” The OoT collaborates with the Department of Planning and Zoning, the Department of Public Works (DPW), and the Department of Recreation and Parks, providing guidance and leadership with these efforts.

**T 6b: Identify high priority transit locations (supermarkets, employment, health care and service centers) where transit ridership on the fixed-routes by older adults and persons with disabilities will increase with improved access.**

Well-situated and well-designed transit hubs can significantly improve transferring from one system, mode or vehicle to another. At a minimum, a transit hub should include amenities like shelters, benches, real-time information, and CCTV for security. Coordinated signage and wayfinding enables customers to make their transfer quickly and easily. Bicycle parking and shared mobility options, and in some cases park-and-ride, help with first mile/last mile access at hubs. ([source](#), pg. 45)

Lead and support. Howard County OoT and the RTA are the lead agencies providing transit services to central Maryland. They are supported by the Central Maryland Transportation and Mobility Commission ([source](#)) and RTA Advisory Council ([source](#)).

**T 6c: Implement a user-friendly wayfinding system that will make pathways and long-distance pedestrian and bike routes more accessible.**

Wayfinding is a key component in making longer trips for bicyclists enjoyable and stress-free. Similar to street signs facilitating travel for motorists, wayfinding signs facilitate travel for bicyclists and pedestrians. Wayfinding signage encourages active transportation, is accessible to most users, replicates muted street signage, and connects them to the jobs, activities, and places important in their lives.

Lead, progress in 1-5 years, challenge. Advancing wayfinding is a high priority for Howard County Office of Transportation and an initiative the County plans to implement within the coming year. Efforts to reach this goal include continued collaboration with
the County’s DPW and the Maryland Department of Transportation to meet all requirements for a viable, state-of-the-art wayfinding system and construct the remainder of the system, as soon as possible, once consensus is achieved.

**T 6d: Ensure County Capital and Developer projects adhere to recommendations made by Complete Streets Implementation Team through Community Engagement Plan**

Ensuring that transportation projects, both capital and developer initiated will be critical to the implementation of the County’s Complete Streets policy. The Community Engagement Plan is a critical element of the policy implementation. This will require active transportation be considered in all transportation projects. An element of this outreach includes the engagement of the residents, developers, and other members of the business community to provide feedback and input on the County’s revisions to its design manual and land use regulations.

Lead, support. The County’s Complete Streets Implementation Team (full list [here](#)), with representatives from stakeholder agencies: the OoT, DPW, the Department of Planning and Zoning, and the Department of Recreation and Parks. Consultants will provide support.

**T 7 Implement Strategic Roadway Safety Plan for roadway elements to create a safe and well-designed transportation system for older drivers**

The Howard County Strategic Road Safety Plan (SRSP), developed in 2020, serves as a roadmap to guide County policies and actions aimed at reducing the number of traffic-related crashes, injuries, and fatalities using a comprehensive and strategic approach based on the four Es of traffic safety: Engineering, Enforcement, Education, and Emergency Medical Services.

The Howard County SRSP is a component as well as requirement of the US DOT Highway Safety Improvement Program and closely aligned with the MD Strategic Highway Safety Plan (SHS)). The Federal Highway Administration (FHWA) oversees the State SHSPs and provides the guidance, models, and resources needed to develop the State Plans. Federal guidance with strategic safety planning focuses on 22 emphasis areas which include drivers and driver behaviors, vehicle-related modes, specific collision types, and problematic driving environments which present safety challenges. Pedestrian travel is included as is local safety planning and emergency medical services.
The Howard County Office of Transportation (OOT) in cooperation with other stakeholder agencies (including five local and two state agencies) created a data-driven plan of proven cooperative strategies and achievable goals addressing the most locally significant “emphasis areas” including the three most pertinent to Senior trip-makers in Howard County ... determined by accident experience of older trip-makers:

- Speeding / aggressive driving – impacts on older adult (all) pedestrians and occupants/drivers
- Infrastructure-related collisions- intersection collisions and merging /changing lanes
- Pedestrian/bicyclist collisions -vehicle size/speed, lighting, crossing speed

**T 8** Promote driver education and vehicle maintenance support for older adults (e.g., CARFIT)

**T 8a: Promote driver education and vehicle maintenance support for older adults to ensure continued safe operation of automobiles and help identify safety concerns using programs such as CARFIT.**

There are a few resources available to assist older individuals to be better drivers currently available thru AARP and the American Automobile Association (AAA). One of these programs is CarFit. CarFit is an educational program that offers older adults the opportunity to check how well their personal vehicles "fit" them. The CarFit program also provides information and materials on community-specific resources that could enhance driver safety and/or increase driver mobility in the community. These sessions have been offered in Howard County in coordination with the Howard County Police Department Community Liaison and volunteer occupational therapists who are trained in assessing the correct fit of the individual to his/her vehicle. It is recommended that this program continue to be offered at least once a year in the county and promoted through venues identified above. There is now an online program so that older drivers can assess their vehicles independently.

The Maryland Motor Vehicle Administration (MVA) sponsors an Older Driver Week promotion: [https://mva.maryland.gov/](https://mva.maryland.gov/) It is recommended that Howard County promote this resource through existing venues. This would enhance the ability of older drivers to be aware of resources to continue to be safe drivers.
AARP offers a **Smart Driver Course** for a modest fee. This training reinforces good driving techniques for older drivers and is offered online and in person. This training provides an overview of strategies and techniques to assist an older driver to be a safer driver. It may also provide insurance reductions upon completion.

**T 9**  Develop and provide education related to physical and psychology process of transitioning away from driving

**T 9a:** Promote education to families and Older Adults about the physical and psychological process of transitioning from driving.

A fact sheet/brochure should be developed to share how to talk with loved ones about transitioning from driving. This resource would include information available from AARP. This organization offers a resource on how to evaluate if a family member is unable to be a safe driver: [https://www.aarp.org/auto/driver-safety/info-2018/older-drivers-driving-safer-longer/](https://www.aarp.org/auto/driver-safety/info-2018/older-drivers-driving-safer-longer/). In addition, information from the MVA is available on how to assess an older driver [https://mva.maryland.gov/safety/Pages/older/older-driver-safety-safe-mobility.aspx](https://mva.maryland.gov/safety/Pages/older/older-driver-safety-safe-mobility.aspx). These and similar documents should be posted on the OOT and OAI webpages in English, Spanish, Korean and Chinese and shared with all of the above entities.
Work and Civic Engagement

WCE 1 Develop an expanded and centralized (one stop) engagement / volunteer center

Create “one stop shopping” for all volunteer, engagement, pro-bono, gig activities.

- Provide leadership and cooperation with state, local and national volunteering programs
- The Governor’s Office on Service and Volunteerism
- Points of Life Foundation
- Provide leadership on volunteer issues in community planning and budget.

Howard County had a central volunteer organization from 2001 until March 2020. Columbia Association suspended the Columbia Volunteer Center at the start of the pandemic. Most of the county government and community services continued in some form. Stopping the volunteer center is a collapse of the infrastructure of community services during a period of high need. Volunteering is a community-wide resource and deserves attention and support as a key part of the County’s infrastructure.

The impact of closure on volunteers was noted as a decrease in volunteer time of 80%. The largest reason (64%) is that volunteers were not sure where to find virtual opportunities, although selective virtual opportunities and informal innovations supported engagement for some (examples include, mask production, food drives, and check-ins for those isolated). Selective government volunteer programs surged for those with skills for comfort (COAD, Older Adult Medical Corps). Capacity constraints limited the ability of the few organizations supporting virtual volunteering. Source: Independent Sector

The impact of closure on service organizations was significant. Organizations that had been using volunteers reduced services and as a result often increased costs by adding staff hours. For those volunteers that continued there was increased stress. The lack of training and assistance on how to adapt to a virtual and safety-focused environment made it difficult for service organizations. Translating the general guidance of the health department to the specific issues of volunteering requires leadership and understanding in volunteer issues. The smaller services organization with intimate ties to the communities of greatest need were the most impacted. The closure of the Columbia Volunteer Center when it was most needed is tragic.
WCE 1a: Continue/resume the activities of the former Columbia Association Volunteer Center with expanded scope and services

Continue:

- Database of volunteer opportunities
- Consulting assistance for volunteer(s)
- in identifying opportunities
- assessing interests and fit
- in completing vetting protocols
- conducting orientation and on-going mentoring
- Consulting assistance to nonprofits in how to manage volunteers
- quarterly meeting of volunteer managers and
- periodic training for first time volunteer program managers

The following is a description of the legacy Howard County volunteer program - the Columbia Association Volunteer Center.

The Volunteer center had a lean infrastructure within the Columbia Association community service department. Three, half time staff, supported three activities: 1) monitoring the online database of opportunities, 2) assisting community members who wanted to volunteer, 3) assisting nonprofits in starting and managing a volunteer program. The largest effort was in maintaining an opportunity listing in the database, which was provided through a license fee to the Point of Life Foundation – a national nonprofit focused on leading volunteer programs across the country. Columbia Association managed the email and communications program and retained contact information for the 9883 recipients of the Volunteer Center e-newsletter. Columbia Association also managed a Facebook and Twitter account.

Resuming volunteer center activities requires an understanding of the workload and capacity requirements for the re-imagined Volunteer Center. According to the 2019 annual report to the Points of Light Foundation, the following were the workload details:

Question: how many unique volunteers engaged?

Answer:

a) 2101 referrals
b) 668 fulfilled matches
c) 245 managed matches
d) 105 trained

The volunteer center strategy and approach were to build a network. The following categories were reported in the 2019 questionnaire

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<th>Number of volunteers</th>
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WCE 1b: Expand scope of former engagement/volunteer center to form a consolidated opportunity for volunteers to register for “one stop shopping”

- Consolidated, central database of all volunteer and engagement opportunities
  - Opportunities in Columbia Association volunteer center database
  - Opportunities in Howard County government volunteer database
  - Opportunities in Association of Community Services (ACS) database.
The Howard County Government Volunteer Program  
www.howardcountymd.gov/Departments/Recreation-and-Parks/Volunteering

is organized around the central database called “Samaritan”. Volunteers create an account and sign-up for volunteer opportunities that are listed. Registration requires age, gender, and a liability release. Background checks requiring a social security number or finger printing are required for most opportunities. Three primary users: 1. Department of Recreation and Parks 2. Department of Community Resources and Services 3. Department of Sustainability. The largest user is Recreation & Parks which is described here.

Profile of volunteers: 1,989 registrations in 2019. Age: a) 331 under 18, b) 1,401 age 18-54, c) 257 age 55+. Most of the volunteers are coaches or program participants. The database also supports special events like Wine in the Woods.

In 2019 the top three programming areas were: sports and adventure division, natural resources and heritage programs, and the recreation services division. Length of time of events can be anywhere from one day to consecutive days (recurring would still be considered a one-day event).

Communication and promotion of programs: events occur through a regular catalog provided to each Howard County home. Also available on County website, Facebook, and an extensive email outreach list.

Opportunities are not normally listed in the Volunteer Center database. Community members wishing to volunteer are required to have knowledge of separate systems and be willing to engage in both to find appropriate opportunities.

The Association of Community Services (ACS) Volunteer Program  
www.acshoco.org/resources/job-board-internships-and-volunteer-opportunities/ . ACS maintains a directory of opportunities on its website open to the public. The program supports ACS members and includes primarily paid positions. Volunteer opportunities are included in the database with limited entries.

**WCE 1c: Expand scope of former engagement/volunteer center to support engagement opportunities, community support, person to person volunteering.**

- Daily living short time help
• Babysitting, snow shoveling, home repair, leaves, mowing lawn, installing light bulbs.
• Today there is a patchwork of listings in Patch, bulletin boards, village newsletters.
• Direct services to clients in need, including tutoring or mentoring programs (for youth and adults),
• teaching adult literacy (including financial literacy -- bookkeeping and budgeting)
• Providing career counseling to those in transition.

The work group suggests building on examples like the Montgomery County 50+ Volunteer Network model. [www.montgomerycountymd.gov/older adult/volunteer.html#50](http://www.montgomerycountymd.gov/older adult/volunteer.html#50). This program includes a matching between community member/program that has a short-term specific need and volunteers that have interest in volunteering.

In Howard County the gap is lack of access and knowledge about needs and volunteer interest and availability. A variety of informal listings exist, with little consistency. Currently, community members ask for help through Patch, village newsletters, Craig’s List, Community bulletin boards, etc. The program that existed fostered person to person connection, but did not provide vetting, or evaluation.

**WCE 1d: Expand scope of former engagement/volunteer center to support engagement opportunities including 1:1 computer help for the novice**

It is suggested that volunteers could provide one on one computer help for the novice for tasks such as registering for vaccines, accessing zoom to see family, turning on the cable. This requires familiarity but limited technical depth. Best done face to face. Some of the programs could be intergenerational in nature.

This program would match community members with short term computer access problems and volunteers who can provide basic assistance. The primary focus would be how to access external databases for community services community engagement. Volunteers help in referral and use of remote programs by library and Older adult Planet.
WCE 1e: Expand scope of former engagement/volunteer center to support engagement opportunities including paid gig work

- Short-term consulting projects, such as grant-writing, accounting, strategic planning, marketing, resume development, web design, or IT help
- Similar to the Montgomery County 50+ Volunteer Network model.

Short-term consulting projects, such as grant-writing, accounting, strategic planning, marketing, resume development, web design, or IT help would be examples of gig-work that could be valuable to organizations in Howard County. The suggested program matches community members with paid gig work opportunities. This includes freelance, project, and part time work. Currently there is a gap due to the complexity and irregular participation in community-focused projects. The largest source of GIG listings is Indeed or Upwork. Both are international and emphasize hot skills. Local opportunities are sometimes shared on Patch or the Chamber of Commerce, ACS website or through word of mouth. Government employment centers focus on full time employment. The challenge for many community members who aspire to paid part time or GIG project work are unable to find opportunities. By adding this opportunity to a well-established engagement center, experienced individuals could be matched with organizations seeking such individuals. It is a win-win situation at the local level.

WCE 1f: Expand scope of former engagement/volunteer center to support engagement opportunities and expand or join government sponsored assistance programs

- Improve diversity, equity and inclusion, including more access for older Americans
- Assist community members in identifying and applying for gig-volunteer opportunities
- Increase sponsorships.
- Increase number of programs.

This program has two objectives: 1) promote the more effective use of government sponsored volunteer program in terms of engaging volunteers that represent diversity, equity and inclusion including older adults, 2) assist community members if applying and engaging with government sponsored volunteer programs. Today the gap in the current fragmented system requires community members to have knowledge of the programs and the ability to navigate the application and screening process. The result is that many opportunities are based on who you know or what you have heard about.
This proposed program is focused on increasing the opportunities and expanding use of programs like RSVP, Foster Grandparents, and Older adult Companion Program.

**WCE 2: Create or Reinvent a Time Bank.** *Time Banking* is a mode of exchange that lets people swap time and skill instead of money.

- Expand non-profit staff sharing project. Current projects include: FIRN, Neighbor Ride, Hopeworks. Pilot funded by CARE Act.
- Reinvent or replace former Columbia Association Timebank (inactive since March 2020) [https://columbia.timebanks.org/](https://columbia.timebanks.org/)

Studies have shown that timebanks improve volunteer activity and community engagement.

1. Study of Visiting Nurse Service of New York found that 90 percent of respondents said that they had gained new friendships through the time bank, and 70 percent said that they had contact with their new friends at least once a week. Two-thirds of them said that their access to health services and other resources had improved. Most respondents reported that time bank membership gave them the support that they needed to stay in their homes as they aged. They also indicated that their involvement in the time bank had given them an increased sense of belonging and that their trust in people from other backgrounds, cultures, and age groups had increased. In addition, 98 percent of them said that they had skills that enabled them to help others via the time bank.

2. Study of timebank [Partners in Care](https://communityskillexchange.timebanks.org/), serving Maryland counties of Anne Arundel, Calvert, Frederick, and Talbot, found that older adults were able to improve safety and remain in their homes. Partners in Care teams fix leaking faucets, change lights, and install safety equipment such as shower seats, toilet risers, and railings. Members of the community also earn time credits by providing rides to older people who can no longer drive. **Source:** [https://communityskillexchange.timebanks.org/](https://communityskillexchange.timebanks.org/)
**WCE 3**

Develop a program to provide education on best practices in volunteer management

**WCE 3a: Create a training, peer-support structure, volunteer network, “community of practice” for volunteers and nonprofit managers**

- Build capacity of individuals and groups.
- Develop training program
- Provide updates, share resources
- Provide assistance and training/mentoring support for each other
- Sharing network uses collaboration technology and communication tools.

Effective volunteer management requires skills and abilities to implement effective practices. Effective practices have been developed. The Urban League study of 3,000 volunteer programs identified the following practices that impacted volunteer satisfaction and outcomes for the sponsoring organization. Many other studies and training materials are available to support volunteer programs.


The above study recommended nine volunteer management practices. The proposed program will support small organizations in performing these activities.

- Supervision and communication,
- Liability coverage and background checks
- Screening and matching volunteers to jobs
- Regular collection of information on volunteer involvement
- Written policies and job descriptions
- Recognition activities
- Annual measurement of volunteer impact
- Training and professional development for volunteers
- Training for paid staff in working with volunteers

**WCE 4**

Develop a Howard County Encore Initiative (i.e., gig work with social impact for highly skilled professionals in retirement)

Howard County Encore Initiative is a purely local program and separate from the national Encore program. For the purpose of this initiative, encore jobs are usually
defined as jobs where the individual searches for purposeful engagement while seeking to meaningfully contribute to communities and society. Encore jobs are often long-term (although they can also be short-term) and may be either volunteer or paid positions – aligning the individual’s passion for a new career or purpose with the host organization’s mission and objective. Workers may decide to remain in a well-known career field, and volunteer within that field, for example assisting a non-profit to conduct a strategic planning exercise for mentoring students/youth in K-12, health sciences, or environmental protection activities; or a government department to develop a communication and marketing strategy for raising awareness about the Age-Friendly initiative. Others may choose to seek out a new career – whether paid or volunteer – in a completely different field. Many of these careers focus on social impact – such as non-profit or community-based groups.

Rationale:

"As we get older," Marc Freedman said, "we want to be part of something larger than ourselves." ii

1. In recognition of a gaps-proposed plan for improvement, there is currently an uneven and often limited access to specialized volunteer opportunities for individuals or members of the community who often rely upon someone-who-knows-someone or who knows about a specific program that needs their specialized skills. Many of the programs supporting such highly skilled volunteers require membership or eligibility. For example, Howard County Leadership Premier is limited to an admitted member of the Premier Program, and the Association of Community Service listings are limited to ACS members, etc. Partly because of such restrictions, participation rates are often low despite a large population of highly talented and skilled individuals in Howard County looking for gig-volunteering opportunities. Volunteer levels in Howard County remain low for highly skilled older adults, especially in subgroups of color or ethnicity. Correspondingly, recruitment, assessment, and the matching process are underdeveloped. Some of the larger nonprofits have formal board recruiting objectives, but few nonprofits have a program to recruit and retain highly skilled volunteers in robust roles capable of advancing their social impact. In this sense, “highly skilled older adult volunteers who have demonstrated proficiency in a specialized expertise or profession”, describes potential volunteers not narrowly construed to suggest doctors and lawyers, but also to include artists, academics, technology experts, or social impact engineers, etc. and it should be clear that the term “high skills professionals” is meant in a "big tent" way.
2. It is recognized that volunteers who have developed skills and expertise over long careers may still require training to take on new and somewhat different roles in their gig-volunteer/work positions. An encore volunteer who is accustomed to being in charge in the past would require some education and mentoring to change his/her mindset prior to assuming an encore position. Likewise, the nonprofit would need to be trained / coached to integrate the gig-volunteer position as non-threatening to the organization's existing staff.

3. Baby Boomers are the largest generation in history, and as they reach the traditional retirement age of 65, many are leaving the workforce and seeking meaningful part-time employment or volunteer roles through a wide range of encore jobs. The exodus of Boomers from the mainstream workforce creates a knowledge and experience gap that Gen X and Millennial generations cannot readily fill. Therefore, as the knowledge gap increases, managers will be faced with recruiting and hiring encore workers to fill the gap and retain human capital.

4. Top performers, proficient in various fields, yet ready to leave the workforce, often retain influence over decisions, funding and resources of the organizations where they were employed prior to retirement, by serving on boards, foundations and through pursuit of philanthropic endeavors. Many have forged strong connections and relationships within the communities where they have worked and served. These individuals with unique, strong engagement skills could be instrumental in raising awareness to broaden the reach surrounding the *Age Friendly/ Howard County Encore Initiative*. Potentially, these volunteers would be equipped to expedite and channel sponsorships and funding, could serve as conduits towards achieving efficiency in matching resources to needs, (as stated in the recommendation), for furtherance of mutually shared or aligned missions, talent attracting talent.

5. Corporate sponsors are often looking for ways to enhance their visibility through “Corporate Social Responsibility” projects. Corporate social responsibility (CSR) is a
self-regulating business model that helps a company be socially accountable—to itself, its stakeholders, and the public. By practicing corporate social responsibility, also called corporate citizenship, companies can be conscious of the kind of impact they are having on all aspects of society, including economic, social, and environmental. Through CSR programs, philanthropy, and volunteer efforts, businesses can benefit society while boosting their brands. As important as CSR is for the community, it is equally valuable for a company. CSR activities can help forge a stronger bond between employees and corporations, boost morale and help both employees and employers feel more connected with the world around them. Starbucks has long been known for its keen sense of corporate social responsibility and commitment to sustainability and community welfare. Small-and-mid-sized businesses also create social responsibility programs, although their initiatives are not often as well-publicized as larger corporations. The Howard County Encore Initiative would benefit from engaging and incentivizing local and regional corporations to invest in supporting encore projects for greater community good.

6. Areas of encore engagement for the older adult are stated in this diagram prepared by Encore (https://www.encore.org). As described, rising longevity and economic and other pressures encourage many people in their 60’s, 70’s, and beyond to continue to find work, encore careers, and volunteer opportunities that benefit all generations, offering a dynamic and creative alternative to traditional retirement and social isolation. Through an encore program, older adults serve as a force for social impact (ref. American Society on Aging). They bring new sources of talent to solving social problems.

7. Howard County Task Force on Economic Opportunity and Prosperity has also understood this dimension of society’s development. The education and business workforce development committee made important recommendations for Encore programming in its 2018 report.

8. Related Howard County efforts – both past and present -- are instructive and provide scope for building upon past experience and insights to advance this effort. Among these the most relevant are:

- Howard County Leadership Premier program’s final session is “Finding Your Place”. This day-long program is designed to provide skills in board service and community engagements. The session introduces graduates to Howard County nonprofits who have opportunities.
• Association of Community Services maintains an online directory of opportunities including board positions and high and low skill paid and volunteer positions.
• Columbia Volunteer Center (CA) formerly maintained an online directory of opportunities including board positions and high and low skill volunteer positions.
• Medical Reserve Corps provides a range of opportunities for clinical and non-clinical volunteers to support health needs in the community.
• Encore Howard County operated for two years as an affiliate of the national ENCORE organization. The group provided workshops at the OAI Reimaging Aging Expo, Leadership Howard County and other groups. The organization stopped in 2019 when the founder moved to Delaware.
• A new nonprofit “This Point Forward” launched in 2020, focusing on training and support for 50+ audience identifying choices and opportunities. The focus is both paid and volunteer opportunities. The founders (Pat Sasse and Mary Thompson) were leaders of the earlier Encore Howard County organization. This Point Forward is currently developing a program that will be open to all residents and will prepare them to volunteer effectively in a “high-skilled” role. It will focus on recruiting, training, and matching highly skilled volunteers with nonprofit organizations in need of their services. It will also focus on preparing nonprofits for engagement with highly skilled volunteers.

9. As stated in the definition earlier, Howard County Encore Initiative is recommended to be a purely local program, completely separate from the national Encore program. Yet, the National Encore Fellowship Program provides a good benchmarking approach to creating successful encore opportunities. Around the country, Encore has placed over 1,700 Fellows, who have contributed nearly 1.7 million hours of work, in nonprofits in 23 states since inception in 2009. The Encore Fellowships core program design includes:

• High-impact engagements: high-quality transferable skills deployed to fulfill critical needs and build organizational capacity.
• Meaningful durations: generally, a 1000-hour commitment; time for fellow to integrate into work host and achieve meaningful impact.
• Compensation: stipend of $20,000 to $25,000 paid by Work Hosts or corporate/philanthropic sponsors.
• Selection and matching: fellows and nonprofits matched according to specific criteria designed to maximize experience for both parties.
Onboarding & cohort support: fellows receive initial guidance and convene regularly for a mix of peer-to-peer learning, professional development, and mentoring from alumni fellows.

Program operator: organization that manages local matching, program marketing, fellow recruitment, and work host and sponsorship business development.

Last, but not least, Action Planning for the Encore Program would include the following steps:

1. Create a core Leadership Team to catalyze change within the initiative’s host agency.

A host organization under the “Group/Agency/Individual Responsible” would be the main implementing agency (IA) who establishes the Howard County Encore initiative in their mission and would consider funding options and sponsors.

2. Conduct a Strategic thinking and planning exercise:

Develop a strategic plan with actionable steps in consultation with a steering committee, Board, and key stakeholders.

i. Define the purpose of the Howard County Encore program—
   a. what is its value added? what is the advocacy? Re-evaluate vision and mission for gig-volunteer programs – aligning it with strategic needs in the community.
   b. Plan for five plus years.
   c. Develop a Theory of Change (TOC) for the initiative as a whole.

ii. Assess gaps and needs within the host organization(s) to determine the intended goal and purpose.
   a. Who do we serve – Who is the client? Who is the beneficiary?
   b. Who is a potential partner/sponsor?
   c. How do we achieve our mission – does the operational team (gig-volunteer and host agent) match the implementation approach?
d. Develop a TOC for each gig-volunteer project – e.g. focus can be on behavior change and/or academic or technical success for participants or beneficiaries, etc.

3. Fundraising and budget
   i. Define a budget and time-frame to implement the strategic plan.
   ii. Search for sponsor(s), grants and donations through foundations, venture capital, donor pool, sponsorships, etc.
   iii. Develop a sustainability plan that includes diversified funding streams, annual drives, fundraising events, etc.

4. Communications and marketing strategy
   i. Establish advocacy ambassadors, an organizational website and newsletter, as well as a marketing and communications strategy that creates voices of champions, advocates (parents, teachers, volunteers, students), voices of community leaders (civic and business leaders), and voices of diversity – rich and poor, white and black, minority, immigrant, special needs, second language, age and gender.
   ii. Build a robust liaison function with the community, schools, parents, health centers, etc. with a focus on outreach and liaison through advocacy ambassadors.
   iii. Develop an achievable definition of IMPACT (including an Impact Statement and Plan), that can be assessed through pre-and-post surveys, anecdotal evidence, and/or video testimonials. A “story of success” is essential for marketing and advocacy purposes.

5. Program management functions
   i. Assign key functions and responsibilities to key members of the core/leadership team.
   ii. Monitor progress through monthly meetings, research and development; documenting progress and impact.
   iii. Build a volunteer base (recruitment and management of volunteers).
iv. Training – strengthen volunteers and develop learning resources through training and workshops – for volunteers, parents, stakeholders, and host organizations. The activities will include developing a core team of trainers; a toolkit; materials such as a resources library; a menu of teaching/learning and mentoring ideas; peer mentoring and coaching tools/and techniques that leverage resources from the volunteer pool and establish a clear set of do’s and don’ts for the volunteer as guiding principles.

v. Office Management functions, including record keeping, filing, administration, book-keeping.